DOCUMENT RESUME

ED 179 835 CG 013 974

AUTHOR	Fisher, Anne E.
TITLE	Women's Worlds: NIMH Supported Research on Women.
INSTITUTION	Locus, Inc., Rockville, Md.
SPONS AGENCY	National Inst. of Mental Health (DHEW), Rockville, Md. Div. of Scientific and Public Information.
REPORT NO	DHEW-ADM-78-660
PUB DATE	78
CONTRACT	278-76-0041(SP)
NOTE	114p.
AVAILABLE FROM	Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402 (Stock No. 017-024-00798-6)
EDRS PRICE	MF01/PC05 Plus Postage.
DESCRIPTORS	Behavior Patterns; Coping; Divorce; *Employment; *Females; Government Publications; Marriage; *Mental Health; Self Help Programs; *Sex Role; *Sex Stereotypes; *Womens Studies
IDENTIFIERS	*National Institute of Mental Health

ABSTRACT

This volume of studies which focus on women themselves is intended for persons who want to know more about what current research is revealing about women, their lives, and their mental health. The research topics address the following areas of concern: (1) sex roles and sex stereotypes; (2) women and work both inside and outside the home; (3) marriage, divorce, and subsequent life-styles; (4) depression and suicide; (5) physical needs and health problems; and (6) helping services provided for women. A section listing the names of the research investigators, their NIMH grant titles and numbers, and other relevant publications are provided in the conclusion. (Author/HLM)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED179835

women's worlds

NIMH supported research on women

by
Anne E. Fisher

CG 013974

Mental Health Studies and Reports Branch
Division of Scientific and Public Information
National Institute of Mental Health
5600 Fishers Lane
Rockville, Maryland 20857

U S DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

Prepared under Contract 278-76-0041 (SP) from the National Institute of Mental Health by Locus, Inc. 222 Forest Avenue, Rockville, Maryland 20857.

DHEW Publication No. (ADM) 78-660
Printed 1978

For sale by the Superintendent of Documents, U.S. Government Printing Office
Washington, D.C. 20402

Stock Number 017-024-00798-6

Probably no man has ever troubled to imagine how strange his life would appear to himself if it were unrelentingly assessed in the terms of his maleness; if everything he wore, said, or did had to be justified by reference to female approval . . . . If from school and lectureroom, press and pulpit he heard the persistent outpouring of a shrill and scolding voice bidding him remember his biological function . . . . People would write books called, "History of the Male" or "Psychology of the Male" or "Males of the Bible". . . .

Dorothy L. Sayers
Scholar and Novelist, 1893-1957

For my part I distrust *all* generalizations about women, favorable and unfavorable, masculine and feminine, ancient and modern.

Bertrand Russell
Philosopher, 1872-1970

Foreword

Rapid social change has become the hallmark of our era. The changes generated by the racial and youth movements of the 1950's and 1960's and the growing socioeconomic strength of the elderly were followed closely by the emergence of women—the majority of the population—as a social and political force. This was an obvious and natural sequel, since the concerns of women cut across all ethnic and racial, age, and social groups, affect and are affected by them. Men and women are discovering new ways of living and of thinking about themselves and each other, and social scientists are reassessing ancient inequities and new options for women in all their relationships.

Both the popular press and professional journals have given a great deal of space to the phenomenon. The Women's Movement and the Equal Rights Amendment have aroused protagonists and antagonists from both sexes. Meanwhile, researchers in many disparate fields have sought to learn more about women's complex and diverse roles and how they play their parts; about their attitudes, and men's; about the anxieties engendered by women's multiple responsibilities; in short, what these changes in living and working mean to women and their families.

Much of the clinical and social research supported by the National Institute of Mental Health both reflects and emerges from the events and the problems of our times. As a part of this effort, the Institute has developed an ongoing program of research about women, much of it done by researchers who also happen to be women, all of it performed to clarify issues and alleviate problems relevant to women and, through them, to their families and associates. Some of these, such as changing stereotyped thinking about sex and job roles in both the home and the workplace, altering attitudes in general, and easing the special concerns of women in ethnic and lower socioeconomic groups, are peculiar to our own time. Others know no time frame—marriage and divorce, depression in women, what goes on in a woman's body, and therapies for women. Research studies on many of these areas are described in this book.

Although the brief reports in this volume are selected only from those studies which are concerned primarily with the woman herself, they inevitably impinge on such other facets of a woman's

life as mother-child interaction, family adjustment to a wife's employment outside the home, or the effects of a mother's depression on other family members. These and many other areas of the life of women in today's world demand further research. The NIMH hopes that this publication will stimulate that research and benefit the women, their families, and the mental health professionals for whom the book was written.

Francis N. Waldrop, M.D.
Acting Director
National Institute of Mental Health

Preface

The National Institute of Mental Health (NIMH) does not have a special center for studies relating to women, but for many years it has been engaged in efforts to develop a program of such research. These efforts include holding conferences to bring together scholars to discuss research ideas and staff encouragement of research on needed topics, as well as funding applications submitted at the researchers' own initiatives.

A series of workshops was held between 1971 and 1975 to assemble scholars to discuss current needs in research relating to women. The first workshop, chaired by Dr. Suzanne Keller of Princeton University, was held in 1971. Called "The Role of Women," it hoped to identify areas of research that had been neglected in the past and to identify needs for information. One of the needs identified was to gather baseline data on the status of women. In May 1972, a second workshop, called "Social Indicators," was held. Chaired by Dr. James Davis of the National Opinion Research Center, this workshop identified sources of existing data from past surveys that could be analyzed or replicated to determine what changes had taken place.

The following month, a conference on the "Biological and Cultural Bases of Sex Differences" was held at Stanford University, chaired by Dr. Beatrix Hamburg of the Department of Psychiatry. This conference brought together researchers from the areas of genetics, endocrinology, animal behavior, anthropology, and psychiatry as well as sociology and psychology. Several years after this conference, it was still apparent that psychological research often failed to use women as subjects or to focus on the psychological needs that women themselves thought important, and a fourth conference was held. It was jointly funded with the Ford Foundation through a contract to the American Psychological Association. Held in Madison, Wis., in June 1975, this conference was cochaired by Drs. Florence Denmark and Julia Sherman. It focused on neglected topics of research in female development, personality theory, achievement, and other psychological areas. Some of the studies in this volume resulted from ideas generated at these four workshops.

In addition, staff of the NIMH has been active in developing a program of research about women. In 1970, Dr. Bertram S.

Brown, then Director of NIMH, initiated the organization of a Women's Council for staff of the Institute to address concerns about women. Dr. Louis A. Wienckowski, Director of the Division of Extramural Research, made staff and funds available to conduct the series of research workshops described above. Early in 1975, Dr. Betty Pickett, then Acting Director of the Division of Extramural Research, appointed Joyce Lazar as a Special Assistant for Research Relating to Women. Dr. Pickett provided the opportunity, the guidance, and the support that made it possible to initiate many outreach activities to encourage research by and about women. Other NIMH staff have also been supportive of such research, particularly Dr. Elliot Liebow of the Center for the Study of Metropolitan Problems, which is responsible for the studies in the chapter on women's work; Dr. Irene Elkin Waskow of the Clinical Research Branch; and Susan Salasin of the Mental Health Services Research Branch.

While some of the research funded by the NIMH was stimulated by the research workshops and through the efforts of staff, most applications were submitted by scholars at universities and research institutes on topics they thought timely and important. All applications, whether encouraged by staff or investigator-initiated, are reviewed for scientific merit by panels of nongovernmental experts selected for their research competence and knowledge of their fields. These panels select the applications to be submitted to the National Advisory Mental Health Council. They also establish a priority order by which applications are to be funded, as sufficient funds are not available to support all applications judged worthy of approval. Thus, the research described in this volume was selected by other scientists as among the best of the applications submitted to the Institute.

Not all the research about women supported by the NIMH is described here. These selections are intended to illustrate the kinds of work in progress when Dr. Lorraine Bouthilet, then Chief of the Mental Health Studies and Reports Branch, and Joyce Lazar first made plans for this publication. At that time, the Center for the Prevention and Control of Rape had not yet been established in the NIMH. Since then, that Center has supported some 40 studies. Though all of these studies are relevant to women, they had not yet begun when this volume was planned.

This volume only includes studies in which the primary concern is the woman herself. Thus, studies of mother-child interaction and attachment where the concern is on the psychological development of the child were not included. Studies of working women were included only if the focus was on the women. Those that examined the effect of a working wife or mother on the adjustment of the family were omitted. Similarly, studies on the effect

on the family or on the children of mental illness or depression of mothers were not included. Only projects designed to tell us more about the mental health or illness among women are described here.

Even a cursory glance at the list of topics in the table of contents makes clear that this is not a book designed to cover all areas of women's lives. Furthermore, while the studies are grouped into six chapters around general topic areas, no chapter reflects all the research that is being done in a given area. If some of the chapters seem rather fragmented, it is because the research that is supported in those areas is itself rather fragmented at the present time. But then, most research about women is supported by agencies other than the NIMH. There is considerable research underway throughout the country that is supported by other sources or that is being done without any financial support. It is hoped that the pieces of research supported by this Institute will fit together with that being done elsewhere to make a more coherent whole.

Most of the studies reported in this volume have been or will be published in professional journals to be read by other scientists and scholars. This book is intended for people who want to know more about what the current research is revealing about women, their lives, and their mental health, but who are unlikely to read the professional publications in which these studies generally are reported. To include as wide a range of topics as possible, all the studies have been summarized very briefly. Those who want further information can write to the authors listed in the appendix.

Table of Contents

Foreword v

Preface vii

Overview 1

Projects and Investigators

1. SEX ROLES AND SEX STEREOTYPES **11**

"In the Beginning"—Origins of the Women's Movement
Jo Freeman 12

Changing Sex-Role Attitudes
Karen Oppenheim Mason 15

Urban Women in Politics
David Greenstone 17

Beyond Sex Roles
Sandra Lipsitz Bem 20

Male and Female Power
Peggy Reeves Sanday 23

Recognizing the Value of One's Work
Lawrence Messé and Charlene Callahan-Levy 26

2. WOMEN'S WORK **29**

Doing Men's Work
Mary Lindenstein Walshok 30

Coping Strategies of Ethnic Working Women
Louise Lamphere 34

Housework, The Labor of Love
Richard Berk, Sarah Berk, and Catherine Berheide 38

Married Women's Attitudes Toward Family and Work
Louise S. Hauenstein 42

Research on Women Workers
Dorothy Wertz 45

3. MARRIAGE, DIVORCE, AND AFTER **49**

Working-Class Marriages
Lillian Breslow Rubin 50

Marriage and Childbearing
Larry L. Bumpass 54

Alimony as an Instrument of Justice
Lenore Weitzman and Ruth Dixon 57

Aspirations of Chicana Mothers on Welfare
Deluvina Hernandez 60
Mothers and Sons: Childraising in Black, Female-Headed Families
Charles B. Wilkinson 61

4. WOMEN AND DEPRESSION 63
Reviewing the Theories
Myrna Weissman and Gerald Klerman 64
High-Risk Groups for Depression
Marcia Guttentag and Susan Salasin 65
Faulty Thinking and Depression
Aaron T. Beck and Ruth Greenberg 67
Comparing Cognitive Therapy With Pharmacotherapy
Augustus Rush, Aaron T. Beck, Maria Kovacs, and Steven Hollon 69
Estrogens and Depression
Edward Klaiber 70
Other Hormones and Depression
Edward Sachar 72
Psychology Plus Pharmacology
Myrna Weissman and Alberto DiMascio 72
Gauging the Impact of Depression
Myrna Weissman and Eugene Paykel 74
Depression and Suicide
Aaron T. Beck and Myrna Weissman 74

5. LIVING IN A WOMAN'S BODY 77
The Menstrual Cycle: Hormones, Mood, and Behavior
Judith Abplanalp 77
Medicine Takes a New Look at Women
Judith Weisz 79
Drug Treatment of Premenstrual Distress
Richard Shader 80
Lithium as a Treatment for Premenstrual Distress
Samuel Gershon, Baron Shopsin, and Gregory Sathananthan 83

6. WOMEN SEEKING HELP 85
Women-to-Women Services
Marcia Guttentag and Susan Salasin 86
Learning to Become Assertive
Marsha Linehan, Marvin Goldfried, and Anita Goldfried ... 87
Housewives Counseling Housewives
Lee Morical 90
Unemployment, Stress, and Helping Networks
Rachelle Warren 96

Conclusion—What Now? 99
Investigators, Grant Titles, Grant Numbers, and Relevant Publications 101

Overview

Why Another Book About Women?

In recent years "women" have become an issue, a topic of conversation, a group to organize and be organized, and a concern to the media, to employers, to the Government and its lawmakers, and, most of all, to women themselves. Information about women and the changes in their roles, their attitudes, and their lives is sought after eagerly. The quest for information has been reflected at the National Institute of Mental Health (NIMH) by an increase in the number of research studies about women funded in recent years.

Why Research on Women Is an "In" Topic

Interest in learning more about women has arisen in recent years because of the rapid changes in social conditions and social values and the growth of the organized attempt to change these conditions known as the "Women's Liberation Movement." The rapid shift of values in the sixties caused many of the young and not so young to reassess their lives. The concept of alternative lifestyles became popular, and many people began to realize that there were numerous options open to them. Some people decided to delay marriage or not to marry at all. Others, already married, obtained divorces. Increasing numbers of women, most married but some divorced and widowed, began to pursue second careers outside of the home. Men were being asked to assume more household and family responsibilities. As women's roles broadened and changed, it became apparent that there were great gaps in our knowledge and understanding about these new lifestyles. Descriptions of the new roles appeared in the popular press. Studies of the new lifestyles were followed by studies of the stresses and strains resulting from the rapid changes.

Social Research and Social Values

Social research both emerges from and reflects the society and the times. Throughout our history, and in this century in particular, concern has developed about special groups of people who

seem not to be getting their share of the American dream. Among the enduring values of the American culture are beliefs in human rights and equality, though such values have not always been translated into action. Social scientists have documented existing inequities in the society and have attempted to account for the causes of the disparity between values and action. In the early decades of this century, child labor became a social issue. Researchers and reformers worked together to make known the conditions of the many very young children who toiled for long hours in intolerable conditions for substandard wages. Inequalities in housing and employment as well as in interpersonal relations became a public concern in the 1920's, 1930's, and 1940's, resulting in an increase in social and psychological research on attitudes and prejudice toward ethnic groups—Jews, Irish Catholics, and later immigrant groups.

Following the holocaust of the Second World War, social scientists began to investigate the personality structures of those who practiced extreme antisemitism, and the study of the authoritarian personality became a major research topic of the 1950's. With the growth of the civil rights movement, demographers and sociologists, among others, pointed to the vast differences in education, occupation, income, and other indicators of attainment between whites and all groups of nonwhite Americans. Research on racism and its impact peaked during the 1950's and 1960's. Much of this research refuted the popular myth that anyone who tried hard enough could make it in America. The effectiveness of many of the social institutions in helping minorities was questioned. "Institutional racism" was a concept made popular by scholars, minority leaders, and the media.

By the mid-sixties, women began to complain that, though they were a majority of the American population, they, too, held a diminished status in the major arenas of the American society: in public life, in the workplace, and even in the home. What has become known as the women's liberation movement got underway. As women became more vocal about the inequities they saw in their lives, they became a target for research just as had Jews, blacks, and other minority and ethnic groups before them.

Inequities continue in the latter part of the 1970's. One woman in four lives on an annual income of less than $4,000, compared with one man in eighteen. While most women are currently employed outside the home, they, like the racial and ethnic minorities, are clustered in the lowest paying occupations and often in deadend jobs. In spite of Federal legislation and a great deal of public support for the belief in "equal pay for the equal work," the earnings gap between men and women continues to widen. Women employed full time in 1976 earned less than 56 percent of

what men earned; whereas in 1967, women's earnings were 62 percent of men's.

Why did it take women so long to call attention to their unequal status? The history of the protest of minorities is relevant again. Prejudice against Jews became a topic for public concern and for research when a sizable body of Jews became educated and secure enough as Americans to articulate their concerns. Much of the research on antisemitism was initiated by Jewish scholars. The civil rights movement was spearheaded not by blacks in the lowest positions, but by educated blacks secure enough and with sufficient resources to organize the protests. Though some research on prejudice against blacks has been done by white researchers, much of the research on racism in recent years has been done by black scholars. Many similarities exist with women. Given their traditional financial and emotional dependence on men, women have been slow to organize for protest. It required a "critical mass" of educated women to launch the women's liberation movement, as the study by Freeman described in chapter 1 indicates. She examined the early history of the movement and found that its older leadership emerged from the 1963 President's Commission on the Status of Women, while the younger members began in the youth, student, peace, and civil rights movements. Both groups were representative of the better educated women in the country.

Measuring Social Change

As more women began to pursue higher education and to enter the labor market, women's roles became more complex, more diverse, and often more contradictory. Attention in the media began to focus on the changing status and roles of women, though there were those who thought that the change was more apparent than real. Some charged that a small group of highly visible, militant "women's libbers" were merely creating the impression that many American women had changed their attitudes. The research done by Mason provides a definitive answer to this charge. Her study, reported in chapter 1, compared a series of public opinion polls about women's attitudes toward home, family, childcare, working mothers, and egalitarianism. From an analysis of polls conducted between 1964 and 1974, Mason finds that, indeed, there has been a substantial attitude change among women in all walks of life. Further, the attitude change seems to be related to the employment status of women.

Not only have attitudes changed, but many women's lives have changed. Only in recent decades have women had easy access to reliable contraceptive methods. Family planning has reduced the

274-865 O - 78 - 2

birth rate and changed the timing of births. This, together with increased longevity, means that most of a woman's lifespan is free from the historic responsibility of raising children. The increased divorce rate and the decline in the marriage rate mean that many women are leading economically self-sufficient and more socially independent lives. Many of the age-old assumptions about women have been opened to question by society, by women, and by men. There is a gap in knowledge about how women are now living their lives. Some of the research in this book is seeking answers to the questions raised by all these changes.

New Research by New Researchers

Another major influence on the new research about women is the increase in the number of woman scholars during the decade of the 1970's. Increasing numbers of women scholars completed graduate degrees in the late 1960's and 1970's, and many of them have begun to conduct research, as illustrated by the fact that, in 1971, only 10 percent of NIMH research grants were awarded to women; in 1976, 23 percent were. Many of these women researchers—some young, some trained after their children had grown and left home—are emphatic about studying topics that are central to their lives and to the lives of other women. They have brought about changes in areas of research as well as in some of the assumptions about how research should be conducted.

Many of the topics in this book illustrate these new perspectives. When nearly all researchers were men, many topics relevant to women's lives were virtually ignored. For example, history books written by men tend to focus on the power of politics and war and tell us little of what the women of the times were doing. Among the previously neglected topics about women described here are: the study of women in politics, by Greenstone; cross-cultural perspectives of male and female power, by Sanday; how working-class women feel about their lives and their marriages, by Rubin; and the impact of divorce laws on alimony awards, by Weitzman and Dixon.

In a society as achievement oriented as ours, it is more prestigious to be a doctor, lawyer, or professional than a blue-collar worker. It is similarly more prestigious to study occupations other than those at the lower end of the achievement ladder. In the "Sociology of Occupations" there are many studies of professional groups but little research on housewives, the largest but one of the least prestigious occupational groups in the United States. The Berk-Berheide study described in chapter 2 is gathering systematic information about how housewives in America spend their days and years and how they feel about the work they do.

Some of the studies in this volume, for instance the research on the relationship of hormones, brain function, and behavior, described in chapter 5, became possible only in the last few years, with the development of the scientific knowledge and technology that enabled the research to be carried out. Others, such as the study by Abplanalp of the relationship between hormones, mood, and behavior in normal women, are a product of the new perspectives female scientists have brought to their research.

Women Researchers as Critics of Research

Women researchers have also challenged some of the theoretical traditions within which research has been conducted and the mental health of women assessed. The study by Bem reported in chapter 1 questions the mental health consequences of what it means to fill the rigid social definitions of "masculine" or "feminine" roles. Her research on androgyny has already changed standards of evaluating the psychological health of men and women.

Researchers agree that, at all ages, more women than men are diagnosed as depressed, but their explanations of why this is so and what to do about it differ. The research reported in chapter 4 illustrates some of the varying perspectives on what accounts for the greater vulnerability of women to depression. The feminist explanation of why more women than men are depressed is that more women lack the power to deal with the many stresses and demands they encounter in their lives, and that, since stress is cumulative and women tend to have more limited resources and less power with which to cope with it, more women than men become depressed.

Guttentag and Salasin emphasize the "learned helplessness-life stress model" of depression. They call for a change in the life circumstances of women as a treatment for depression. Beck and his research team, on the other hand, view depression as a cognitive disorder—how people ruminate about and deal with the problems they face in life. They do not deny that many women have limited options in life, but they see the alleviation of depression as possibly coming about through changes in how women think and act about their situations. Through cognitive-behavior therapy, the therapists try to change the negative views these women hold about themselves so that they can accept responsibility for their lives, goals, families, careers, and psychological symptoms.

Other scientists examining depression among women are seeking biological explanations and treatment; some, such as Weissman and Klerman, are examining both the biological and psychological approaches. Thus, within this volume we have differences of

opinion among researchers themselves about whether the roots of depression reside in the woman or in the conditions that surround her life. In general, it is the women in this field who first raised the issue of the importance of sex-role socialization and life circumstances in contributing to women's higher incidence of depression.

Women researchers have also challenged the methods by which some research has been conducted. In the past, much social research has failed to consider the influence of sex of either the investigator or the subjects. Though Margaret Mead and Ruth Benedict are obvious exceptions, much of the information we have about life in other cultures was gathered by male anthropologists who went to other societies and studied people's lives, including the roles and functions of women and their childrearing techniques. It should be no surprise that, when women anthropologists study these same societies, they often come away with very different information. In social and psychological studies, the sex of the investigator also is often ignored, though it is common knowledge that the behavior of both men and women may be changed by the presence of a person of the opposite sex. Only in the last decade have sociologists considered matching the sex and race of the interviewer with those interviewed.

Until women researchers began to protest, much research on social issues failed to consider the sex of those studied as a relevant variable. Often women were not the subjects of research at all. For many years, social and psychological aspects of achievement motivation were studied only in men. The motivation of women was ignored, or it was assumed that whatever motivated a man would also motivate a woman. Further, research on motivation was limited almost entirely to academic and occupational achievement and ignored aspects of life more relevant to women. Studies in which both men and women were included as subjects often failed to report how many of each participated, presumably on the assumption that sex was irrelevant. When sex differences were examined, only studies that found differences were reported in the journals. Thus, we have no systematic data on the many areas where no differences between men and women have been found.

What Have We Learned?

Even though the decision was made not to include studies of women as mothers, the influence of marital status and motherhood on the lives of women described in this book is pervasive. The impact of age of marriage and of subsequent childbearing is a major determinant in the life course of women, as indicated in

the research by Bumpass, et al. The lifestyle and life satisfaction of a woman depend in large measure on the income of the man she marries, as Rubin reports in her interviews with working-class women.

Now, as throughout much of history, housework remains women's work. The Berk-Berheide study reveals that, whether they work outside the home or not, women still do most of the housework; and most women seem neither to enjoy it nor to hate it. Housework is just there to be done, and women accept it.

Whether the women work as welders, factory workers, or activists in local politics, concern about raising their children well seems to permeate their thinking. Lamphere and her research team found that women who are recent immigrants expect to work and do work outside of the home, often on different shifts from their husbands in order to provide for the care of their children. Hauenstein finds that married women, regardless of race, income, or employment, share many problems but, as might be expected, more of the working wives are concerned about having time to provide adequate guidance for their children. Weitzman and Dixon find that divorced women rarely receive sufficient alimony to support themselves and to provide an adequate level of care for their children.

This concern with care of the home and children is reflected in most of the studies of women in this volume and perhaps reflects the age groups of women studied. None of the studies is of unmarried women, women beyond childbearing years, the elderly, or the aged. It may be that family concerns would not be of such great importance had women in other stages of the life cycle been studied.

As previously mentioned, though scientists may not agree on the explanations, they do agree that more women than men are depressed. Several of the studies described in chapter 4 dispel the myth that depression is more common among the middle-aged woman with "the empty nest." Several also point to the possibility that there may be a future change in the rate of depression among women. Weissman and Paykel found that depressed women employed outside of the home showed less impairment than depressed housewives. They suggest that outside employment may have a "protective" effect on women. Guttentag and Salasin report that women employed at low-level jobs are at high risk for depression. Walshok, who is studying women in blue-collar jobs where the pay is greater than in traditional female jobs, reports that these women are pleased with their new occupations and have an enhanced self-image. Greenstone and associates, in the study described in chapter 1, found that the self-esteem and feelings of competence of women increased as they worked in local

politics. In one of the few studies of employed women, Warren finds that it is the unemployed rather than the working woman who shows more symptoms of stress. As more women enter the labor market, gain access to higher level jobs, or engage in activities outside of the home, one may speculate that the frequency or severity of depression among women may decrease.

This volume also has very few studies on women of various ethnic and racial groups. It is hoped that additional research about such women will be stimulated by the three conferences on minority research needs sponsored by the NIMH in 1977. The need for research in many other areas is highlighted by this overview of what has already been done. It is clear that we need to know more about women who never marry, those who marry but, by choice or circumstance, do not have children and of women who spend a major portion of their lives living alone due to divorce or widowhood.

Though many women have changed their sex-role expectations and behaviors, others have not. There is a need for research on women who continue with traditional lifestyles. How do these women feel about themselves? How do they cope with a changing society and changing relationships? What happens to these traditional women when they are faced with divorce or widowhood in the middle or late years?

What about men? Have their attitudes changed? There are relatively few studies of how men respond to the role changes among women. Do men feel pleased, threatened, or angry when their wives shift their attitudes or behavior after many years of marriage? What are the attitudes of men to increasing numbers of female workers? We know little about how men are reacting in any of the areas of life in which changes have occurred.

Though employment and activities outside of the home may have positive mental health consequences for women, many women still need help in coping with life's problems. Chapter 6 describes a number of innovative treatment services and interventions developed by women, for women. Warren suggests that in urban areas the neighborhood itself may be the greatest resource to provide assistance, especially for working-class families. Guttentag and Salasin report on the help that women give to other women through the organization of a variety of special interest, self-help groups. Similarly, Morical describes how housewives are trained to provide counseling for women who are experiencing stress or crisis. Another technique, which has become popular in recent years and is designed to increase the ability to cope with everyday problems through "assertiveness training," has been researched by Marsha Linehan and Marvin and Anita Goldfried.

The Future of Mental Health Research on Women

Though the studies described in this volume provide us with some information about women's lives and about their mental health, much more research is needed. For the most part, the reports cover only a limited portion of the life cycle of women, since studies of young adult women, of those who are middle aged, and of the elderly are lacking. A conference is being planned jointly by the National Institute of Mental Health and the National Institute on Aging to assess the need for research about women in the later years.

What is the impact of these changes on women themselves? On their personality development? Their psychological functioning? Happiness? Family and personal stability? How are the institutions of the society reacting to these changes? These and many more questions remain to be answered by future research.

The need for basic biological and psychophysiological research continues. There is much more to be learned about the relationship of hormonal functioning to psychological well-being as well as its relationship to distress, both physical and psychological. There is a need for continued research on female endocrine physiology and its relationship to premenstrual states, to postpartum depression, and to menopausal and postmenopausal changes.

When women have symptoms of psychological distress, we need to know more about what led to the distress; its frequency among the different age, social class, marital status, and occupational groups; and what can be done to alleviate it. There has been a paucity of research on the special treatment needs of women and about the orientation and training of mental health professionals who deliver services to American women. The need for ongoing evaluation of pyschotherapy, both process and outcome, is great, both for the traditional therapies and the various alternative treatments and self-help groups initiated by women themselves. Studies that compare traditional therapies with alternative ones would provide information about which therapies are effective for which patients.

The studies reviewed in this volume tell us that some things about women's lives have changed and that some have not. Though much has been learned through the research, many more questions remain to be answered. And even as answers to today's questions are being sought, new research questions are emerging about the dynamic lives of contemporary women.

Joyce Lazar
Chief, Social Sciences Section
Behavioral Sciences Research Branch
Division of Extramural Research Programs

1. Sex Roles and Sex Stereotypes

"There are few good women who do not tire of their role."

Francois de la Rochefoucald, 1613-1680
French Moralist

Formerly, the definition of "woman's role" was clear. Today, life is not so simple. There is no one role for women, and the term "sex roles" refers to a whole range of often conflicting attitudes, behaviors, and expectations for both men and women. Sex-role research, a relatively new field, reflects this diversity in a variety of subjects and approaches. In this chapter, investigators consider some ways in which sex roles have (and have not) been affected by the social upheavals of the sixties and early seventies.

Freeman presents the early history of the oft-maligned women's movement and discusses how it influenced and was influenced by its participants, its own nature, and Government policy. Mason looks at a decade's worth of national opinion surveys and finds that, while sex-role opinions have changed among a wide variety of women, the women's movement probably did little to effect the change. Greenstone and his associates compare the political with the personal in women's attitudes. Changes in self-esteem as well as in political and feminist attitudes, it seems, result from active participation in civic organizations for some women.

In two other studies, traditional sex-role generalizations are contested. Bem, who brought the term "androgyny" and a new psychological scale into widespread use, provides evidence that conventional sex roles actually restrict an individual's range of healthy behaviors. Sanday's cross-cultural look at the origins and consequences of sexual inequality raises the interesting theory that men's historical subjugation of women is due to fear—fear of the powers they believe are inherent in women.

Concluding this chapter is a disturbing finding in a laboratory setting by Messé and Callahan-Levy. Even when women undergraduates know what is fair pay for a particular job, they tend to ask for less than men do, perhaps because they are overly conscious of what others will think of demands for higher pay. It

would be interesting to see if this tendency occurs among other subject groups, given the increasing numbers of women in the work force. Women who have been employed for several years or who come from less privileged backgrounds may react differently than college students.

Taken as a whole, these six research projects reveal that, while we have made significant progress in eradicating some female stereotypes from American life, others remain—some of them accepted and thus perpetuated by women themselves.

"In the Beginning"—Origins of the Women's Movement
Research by: Jo Freeman

Since its inception in the mid 1960's, the women's liberation movement has been many things to many people—potential redresser of social and economic injustice, threat to the American family, media practical joke. To social scientist Jo Freeman of the State University of New York, the women's movement has meant an opportunity to get in on the ground floor in investigating the origins and development of a social movement and, more importantly, the relationship of that social movement to the enactment and implementation of public policy.

From 1967 to 1969, Dr. Freeman was an active participant in what she calls the "younger branch" of the Chicago women's liberation movement. As editor of the first national newsletter, she was able, through letters and interviews, to record how a number of groups around the country started. Between 1970 and 1974, Freeman withdrew from active participation in the women's movement but continued her investigation through contact with feminists and through library research. "This sequence of active participation followed by indirect observation," she says, "afforded me a more informed perspective on the movement than would be possible for anyone who was either primarily a participant or primarily an observer."

Freeman makes the distinction between the "older" and "younger" branches of the women's movement because she believes that, although the movement is quite diverse, it does have two distinct origins from two different strata of society with different styles of operation. The older branch, most prominently represented by the National Organization for Women (NOW), had its roots in the 1963 President's Commission on the Status of Women. The younger branch, Freeman's research has shown, originated in the youth, student, peace, and civil rights movements and is

comprised of women who have little interest in the workings of the American political system:

> The older (branch) is concerned with changes in public policy, and the younger with personal changes by individual people. Consequently, the older utilizes the traditional political channels, as well as other means of active public protest, while the younger emphasizes "changing one's head" by work in small groups . . . . Participants in the older branch were initially older in age and/or working women, especially in the professions . . . .

The greatest similarity between Freeman's two branches is that the majority of both groups are white, middle class, and college educated. This, she says, is an illustration of "relative deprivation." During the course of the 20th century, middle class women have become better educated. At the same time, a number of social and industrial factors have shifted many women's roles and values from the home to the work place. In the work place, these women have found themselves thwarted in achieving the money, promotions, and prestige awarded to men with the same qualifications. The inevitable results of this situation, according to Freeman, are frustration, conflict, and strain.

Crises and Networks

"Social strain does not create social movements; it only creates the potential for movements," Freeman contends. Even a crisis as large as the Equal Employment Opportunity Commission's refusal to take the sex provision of Title VII seriously could not have ignited a social movement without other essential elements. Freeman believes that the women's liberation movement emerged as the result of (1) the growth of a preexisting communications network which was co-optable, i.e., potentially responsive to the ideas of the new movement; (2) a series of crises that galvanized the people involved in this network into action; and (3) a subsequent organizing effort to weld the spontaneous groups together into a movement.

In her book, *The Politics of Women's Liberation,* Freeman traces these elements through both the older and younger branches of the women's movement. The State Commissions on the Status of Women and the "radical community" acted as co-optable communications networks for the older and younger branches, respectively. While the older women were bridling under the nonenforcement of the sex provision of Title VII, the younger branch was being forced to realize through the insensitivity of their fellow male radicals that, even in the radical commu-

nity, "the only position for women was prone." These frustrations brought forth organizers, who provided continuity if not formal leadership.

Whatever their origins, social movements do not operate in a vacuum. Thus, Dr. Freeman was particularly interested in the interrelationship of the women's movement and public policy. Because "policy is the means by which Government stimulates, responds to, and/or curtails social change," she says, "to study movements without studying policy is like studying a coin without turning it over."

"When the women's liberation movement emerged in 1966 and 1967, there was no national policy on the status of women," Freeman says. But by 1972, "a Federal policy of equal opportunity, if not total equality, was clearly emerging in piecemeal fashion, and the legal and administrative tools were being forged with which feminist groups could viably work toward equal opportunity." As examples, she cites how the Office of Federal Contract Compliance and the Department of Health, Education, and Welfare have been compelled by feminist pressure to investigate universities for sex discrimination, and how the Equal Employment Opportunity Commission was similarly pressured into writing better guidelines for the enforcement of Title VII. The battle to pass the Equal Rights Amendment through Congress and the publicity surrounding it, Freeman says, brought together an increasingly wide range of women. Through the ERA fight, the movement gained contacts in Congress. What emerged was a loosely structured network of people in various Government agencies, feminist organizations, and other private institutions, who had a personal and professional commitment to improving the status of women. Together, the participants formed a "policy system" on women's rights. The reason this system came together so quickly, Freeman contends, is that there were a large number of "woodwork feminists" already in the Government—that is, a "co-optable network" and a series of issues came together at the right time.

Just as a social movement affects policy, policy affects a movement's political activities. As Freeman points out, the ERA, around which the women's movement rallied, existed long before the current movement. In fact, it had been brought up before every U.S. Congress since 1923 before it passed in 1970. The ERA battle converted some nonfeminists and attracted many others to women's rights issues. Similarly, Executive Order 11375, by adding sex discrimination to the jurisdiction of the Office of Federal Contract Compliance in 1967, inspired a large number of discrimination complaints against universities with Government contracts. Still, Freeman says, because of limited resources and active resistance

from opponents, feminists were often unable to follow up on opportunities provided by Government action.

As for the future of the women's movement and its impact on ongoing public policy, Freeman sees the honeymoon as over. "The women's liberation movement caught the Government by surprise, and it responded along the lines it had developed for civil rights policy. Now that the backlash (antiaffirmative action) has begun on several fronts, it remains to be seen whether the feminist groups can develop and mobilize their resources to maintain their momentum without getting so bogged down in the nitty-gritty politics of incremental success that they lose sight of their ultimate goals."

Changing Sex-Role Attitudes
Research by: Karen Oppenheim Mason

What has been the impact of the women's movement on women's attitudes in this country? Have attitudes actually changed at all? According to a study by University of Michigan sociologist Karen Oppenheim Mason, in the years between 1964 and 1974 women of all ages and from all walks of life throughout the country became measurably more liberal in their sex-role attitudes—in how they saw themselves in relation to men, marriage, child-raising, and employment. Among the many factors contributing to the change in attitudes were post-World War II improvements in women's education and employment, the rising divorce rate, and an increased spirit of egalitarianism that surfaced in the sixties. However, Dr. Mason found little evidence that the women's liberation movement had a direct effect on this attitude change.

Mason and her colleagues John Czajka and Sara Arber drew their conclusions from a comparison of five surveys made between 1964 and 1974. Using the five attitude surveys, Mason and her research group were able to make three sets of comparisons among women: white college graduates across the country in 1964 and 1970; married white women living in southern towns and cities in 1970 and 1973; and recently and presently employed white women living in large northern metropolitan areas in 1970 and 1974. The following are examples about sex-role attitudes taken from the survey:

A man can make long-range plans for his life, but a woman has to take things as they come

A working mother can establish just as warm and secure a relationship with her children as a mother who does not work.

It is better for everyone involved if the man is the achiever outside the home and the woman takes care of the home and the family.

Men should share the work around the house with women, such as doing dishes, cleaning, and so forth.

A woman should have exactly the same job opportunities as a man.

Mason and her colleagues found significant trends toward more liberal sex-role attitudes among all three groups. Even before widespread media attention to the women's movement, college graduates were more than likely to say that women as well as men could make long-range plans and have careers and that working mothers could have good relationships with their children. Although a majority of white southern women still supported the traditional breadwinner-homemaker division of labor in 1973, they too were changing their outlook. "Especially noteworthy," say the investigators, "are the sizable majorities who, by 1973, endorsed equal rights in the labor market and the idea that it was either morally acceptable or psychologically feasible for women to avoid marriage and childbearing altogether.

Sex-role attitude change between 1970 and 1974 among northern white working women was even greater than that observed among southern married women. On items concerning working mothers, division of household labor, women's achievement outside the home, equal pay and job opportunity, and a woman's right to keep her job while bearing children, both the married and the once-married northern working women showed shifts toward less traditional positions.

Reasons for Change

The investigators concluded that their findings from three such dissimilar groups suggest "considerable and rather widespread change in women's sex-role attitudes since the mid-1960's." To explore some of the reasons for this change, they considered such factors as age, religion, employment, education, marital status, number of children, husband's education and income, and region of residence. Of these, educational attainment and employment status were the best predictors of sex-role attitudes. Currently employed women were usually more egalitarian in their views than those who had worked in the past or never worked.

Although better educated women on the whole had more liberal attitudes, little support was found for the idea that attitudes changed faster among better educated and higher economic status women. The winds of change, it seems, do not blow more swiftly through the upper middle and upper classes. On the

whole, American women's attitudes toward their roles at home have become increasingly similar to the way they see themselves in relation to employment, the investigators concluded.

In addition to assessing the change in sex-role attitudes from 1964 to 1974, Mason's group tried to gauge the influence of the women's movement by comparing the rate of change before and after 1970—the year they surmised most American women first became aware of the movement. They found no clear evidence that the rate of change toward more liberal attitudes accelerated after 1970, and they are hesitant to say that the convergence of attitudes toward family and employment roles is the result of the women's movement. Whether the movement caused attitude change or attitude change encouraged the movement, the investigators have definitely found evidence of substantial change in how a wide range of American women see themselves and their roles.

Urban Women in Politics
Research by: David Greenstone

Jo Freeman demonstrated that women can enact political change. That politics can change women is the subject of a study underway in Chicago. Research by the National Opinion Research Center (NORC) reveals that urban working-class women who become active in militant civic organizations are more likely to undergo change in political and feminist attitudes than either middle-class women or working-class women in more traditional civic groups.

Sociologist Kathleen McCourt of the NORC staff had the initial idea of investigating what attracts certain women to civic organizations and the personal and political impact of their participation. Dr. McCourt, a professor of sociology at Loyola University, read repeatedly in the professional literature that working-class women had few interests outside the home. Yet she saw in the Chicago newspapers and heard from her political contacts on Chicago's Southwest side that working-class women were actively involved in a number of local groups concerned with such issues as blockbusting, high property taxes, highways bisecting their neighborhoods, and air pollution from nearby factories.

Taking a personal look into the matter, McCourt interviewed 40 working-class women to investigate motivations for their participation in these groups and how their political involvement affected them personally. Before McCourt's study was completed, it came to the attention of two senior researchers at NORC, Andrew Greeley, director of the Center for the Study of American Pluralism,

and J. David Greenstone, a political scientist and senior study director. Drs. Greeley and Greenstone felt that McCourt's study, which used basically qualitative interview methods, should be expanded on a statistical basis. With Greenstone as principal investigator and Greeley and McCourt as coinvestigators, they embarked on a project entitled "Politics and Families: Changing Roles of Urban Women."

The larger study seeks to examine not only the impact of civic participation in general but the differences that result from participation in groups of differing ideologies. The sample of about 800 women and 400 of their husbands was recruited from three large community areas of Chicago: the white, working-class, largely Catholic Southwest side; the white, working-class, slightly more religiously mixed Northwest side; and the middle- and upper middle-class, heterogeneous Lakefront district. From among these three communities, 25 neighborhood and civic organizations were selected for investigation.

Three Kinds of Community Groups

Organizations were divided into three categories of "cosmopolitan," "traditional," and "militant," according to the number of controversial issues in which they were involved, the scope of their demands, the extent to which they used direct-action tactics (such as sit-ins), and the frequency with which such tactics were used. The cosmopolitan groups were largely involved in broad-scope, liberal issues; the traditional groups were largely involved with protecting their existing neighborhoods and working within the Chicago Democratic political establishment; and the militant groups were largely organized to protest specific neighborhood issues and used direct-action tactics. The information used to categorize the organizations was obtained from their officers and from field research by the investigators.

Politically active women and their husbands were recruited from among officers, board members, and other active members of these local political organizations. A control group consisted of couples who lived in the study neighborhoods but who had not joined the organizations.

To find out what kinds of women engage in local political activity, both the politically active and inactive women were asked about their background, political attitudes, political behavior, self-image, division of household labor, and feelings about the best life for a woman and opinions on the women's movement. Active subjects were asked to describe their feelings and activities before and after joining the organization. Control subjects were asked how they felt and acted 5 years before and at the present.

Political attitudes and behavior were measured by such questions as "Do you feel city hall is indifferent to your problems?" "Have you ever actively campaigned for any candidate for office?" "Have you ever engaged in some form of civil disobedience such as a sit-in or an illegal picket?" Self-image indicators were: degree of satisfaction with one's general physical appearance, ease in conversation, ability to manage a household, ability to maintain a good marriage, and ability to understand politics.

How do husbands feel about politically active wives? To find out, each husband was interviewed separately on how he felt about his wife's participation in the organization, whether he thought their marriage was happier before or after she joined the organization, areas of disagreement in their marriage, and what he felt was his wife's opinion on "woman's place." Data from this part of the study, still being examined, have been termed a "gold mine" by the investigators because of the potential for expanded analysis.

Three Patterns of Politics

To the investigators' satisfaction, patterns of political participation were found to correspond to their three categories of organizations. These, in turn, were related to personal attitude changes in the participants, most dramatically among the working-class women who became very active in their organizations. Political activity, regardless of ideology, increased these women's self-esteem. It did more than just "get them out of the house"; it gave them the feeling that, by working together, they could produce change.

The mostly middle- and upper middle-class women in the cosmopolitan groups, on the other hand, appeared little changed by their political participation. A high percentage of them hold memberships in other community organizations. Political participation appears to come naturally to these women; many of them had politically active parents. Cosmopolitan organizations, the investigators conclude, are vehicles for increased political opportunity rather than agencies for decisive change in attitudes or behavior of their members.

"Civic duty" is the reason most often given by women who joined traditional organizations. These women were least interested in national politics and had considerably less education than the cosmopolitans. They had the most trust in their city government and were the least likely to think that city hall was indifferent to their problems. However, despite their cultural identification with the Chicago political establishment, a third of these women do not believe their neighborhood is getting its fair share

274-865 O - 78 - 3

of city services. Thus, they band together, not because they have been ideologically converted to protest, but because they see the benefits of concerted action for their neighborhoods. The increased political activity of these women, says greenstone, appears to be a "pure organizational effect," showing little change in political attitudes. However, this is not to say that there have been no personal effects. Women in traditional groups reported increased self-esteem and feelings of being closer to their community and neighbors since joining their organizations.

Women in militant organizations were found to be similar to the Traditional women in that they are largely working class, low in other memberships, and not particularly interested in national politics. However, they differed greatly from the Traditional women in their alienation from local politics. The Militant women were highest both in seeing city hall as indifferent to their problems and in viewing their local alderman as indifferent. These women, the investigators say, have banned together to fight for their local causes because no one else will do it for them. In the process, they appear to have been ideologically converted by their organizations in political attitudes and tactics. This conversion has also affected the most active of them personally, in their feminist perspectives and in increased feelings of competence and self-worth. If these women ever conformed to the stereotype of the home-bound working-class wife, they certainly don't now.

Beyond Sex Roles
Research by: Sandra Lipsitz Bem

No one knows the extent of the anxiety, guilt, and even anguish that has resulted from both suppressing and expressing feelings that fall outside accepted sex-role behavior in our culture. Where men are conditioned to suppress feelings of tenderness and women are discouraged from thinking and acting independently, there are bound to be individuals who feel they are living out their lives beneath a smothering blanket of conformity. Conversely, those who act out their feelings may fear they are lacking the requisite norms of masculinity or feminity, or that, in displaying socially determined "cross-sex" behavior, they may be unconsciously homosexual.

"For years," says psychologist Sandra Lipsitz Bem, "American society has considered masculinity to be the mark of the psychologically healthy male and feminity to be the mark of the psychologically healthy female." Healthy men are assertive, tough, and independent, while healthy women are supposed to be ten-

der and nurturant. It has been only since the advent of the feminist movement that anyone has spoken up for the individual whose personality combines elements of both masculinity and femininity. Such a person, Dr. Bem says, is "androgynous," a term she has brought into usage in psychology. An androgynous individual, as defined by Bem, can be "both assertive and compassionate, instrumental and expressive, and masculine and feminine, depending on the situation." An androgynous individual, she continues, can even "blend these complementary modalities into a single act; being able, for example, to fire an employee if the circumstances warrant it, but to do so with sensitivity to the human emotion that such an act inevitably produces."

Bem, in addition to being an advocate of a new standard of psychological health for the sexes, is also a leader in empirical research on the concept of psychological androgyny. Her research project compared the behavior of "masculine" men and "feminine" women with androgynous men and women. To do this, she had to devise a sex-role inventory that goes beyond the traditional male-female classifications. The Bem Sex Role Inventory (BSRI), now being used by many other investigators, consists of 60 personality characteristics: 20 traditionally masculine (e.g., self-reliant, assertive, independent); 20 traditionally feminine (e.g., affectionate, understanding, gentle); and 20 neutral (e.g., likable, truthful, friendly). These characteristics appear in random order on the test, and a person indicates on a scale of one ("never or almost never true") to seven ("always or almost always true") how accurately each characteristic describes him- or herself.

When the scale was originally designed, the difference between the total points assigned to masculine and feminine adjectives was used as the prime measure of sex typing. Thus, highly feminine individuals were those with high feminine scores, highly masculine individuals had high masculine scores, and androgynous individuals had approximately equal masculine and feminine scores. However, subsequent research has convinced Bem that it may be more appropriate to designate as androgynous only those individuals who have high scores on both the masculinity and femininity scales. Accordingly, a person is now classified as masculine (high masculine-low feminine), feminine (high feminine-low masculine), androgynous (high masculine-high feminine), or "undifferentiated" (low masculine-low feminine).

Bem reports that she and her colleagues have given the BSRI to over 1,500 undergraduates at Stanford. Semester after semester, about 50 percent of the students are found to adhere to "appropriate" sex roles, about 15 percent are cross-sex typed, and about 35 percent are androgynous. Bem also used the BSRI for a num-

ber of experiments designed to gauge the effects of sex roles on behavior. She predicted that highly masculine and highly feminine subjects would display rigid and consistently sex-typed behavior across situations, whereas androgynous individuals would vary their behavior as the situation changed. They would, in effect, express the "best" traits of both men and women.

Caring but Not Conforming

Stanford University undergraduates who had previously completed the Bem inventory were observed interacting with a 6-month old baby, a kitten, and an obviously lonely and troubled student. The purpose of these experiments was to measure the "feminine" behavior of nurturance—how responsive an individual would be toward the cuddly and the helpless.

As Bem suspected, masculine men were the least likely to play with the kitten or the baby or to be sympathetic in listening to the problems of the lonely student. The feminine women responded strongly to the baby and the lonely student, but not toward the kitten. Why they were not drawn to the soft, cuddly animal, Bem isn't sure. Perhaps, she suggests, sex-typed women are afraid of animals or find them unappealing for some reason.

The androgynous woman was as nurturant to the baby and the lonely student as the feminine woman, and more responsive than anyone else to the kitten. The androgynous male proved to be as nurturant as the feminine male.

Bem and her colleagues next set out to measure independence—a stereotypically masculine behavior. Subjects were asked to give their opinions in the face of disagreement by others on whether certain cartoons were humorous. Feminine individuals of both sexes were far more likely to conform to the judgments of others. Masculine men and women were much more independent in stating their true opinions. But then, again, so were androgynous men and women.

Losing Money To Avoid Cross-Sex Behavior

In another series of experiments, Bem and her co-investigators sought to find whether sex-typed people actually shun cross-sex behavior. Subjects were given 30 pairs of activities and asked to select one from each pair to perform before a camera. They were told what they would be paid for each activity.

Some of the activity pairs were masculine versus feminine (oiling a hinge or preparing a baby bottle); some were feminine versus neutral (winding yarn into a ball or sorting newspapers by geological area); and some were masculine versus neutral (nailing

boards together or peeling an orange). The promised payment was always higher for performing the cross-sex or less stereotyped activity.

Again, masculine men and feminine women were the most limited in their choices. "Such individuals," Bem says, "were actually ready to lose money to avoid acting in trivial ways that are characteristic of the opposite sex." This was especially the case when the person running the experiment was of the other sex.

To see what would happen if sex-typed individuals *had* to carry out opposite-sex activities, the investigators asked all the students to perform three masculine, three feminine, and three neutral activities while being photographed. Afterward, subjects completed questionnaires indicating how these activities made them feel about themselves.

"Masculine men and feminine women felt much worse than androgynous people about doing a cross-sex task," Bem says. "Traditional men felt less masculine if they had to, say, prepare a baby bottle; and traditional women felt less feminine if they had to nail boards together." When the experimenter was of the opposite sex, these students said that cross-sex tasks made them feel more nervous and peculiar and less attractive and likable.

With only a few exceptions, Bem contends, her results suggest that traditional sex typing does restrict behavior—that narrowly defined masculinity may inhibit expression of tenderness and caring, and that rigid femininity may hinder independence. To deal effectively with the diversity of situations that adults of both sexes are likely to face, Bem asserts that an individual is better off being androgynous. She suggests that future research concentrate on applying her sex-role concepts in real life as well as laboratory situations, and that we "begin to find out how to facilitate greater androgyny both in children and adults."

Male and Female Power
Research by: Peggy Reeves Sanday

Which best describes the relationship between the sexes in Western culture—the *Declaration of Independence* ("all men (humans) are created equal") or *Genesis* ("She shall be called Woman because she was taken out of Man")? According to University of Pennsylvania anthropologist Peggy Reeves Sanday, the answer is *Genesis,* the story of our creation.

"Origin stories," Dr. Sanday says, "are part of a multiplex, culturally shared fantasy structure which communicates certain basic messages about expected behavior between males and females." After examining origin myths for 39 preliterate societies, Sanday

developed a number of theoretical concepts which she says go beyond the usual cross-cultural explanations of women's status. "By dipping into the symbolic arena and into thought and belief about reproductive processes, I have found that, to understand the position of women in society, one must go far beyond the narrow constrictions of sex roles."

The initial intent of Sanday's research was to empirically test her theories on the nature of female status and the relationship between female power, authority, and prestige in the public and domestic domains. She proposed a cultural model in which such conditions as warfare and male absence increase female participation in subsistence activities which, in turn, increase female status. Sanday expected that female status would be found to be the highest where there was a balanced division of labor by sex. She also expected to see differences in the quality of human relationships in different cultures.

For her study, Sanday obtained information on the domestic, political, and economic domains of 61 preliterate societies, using the Human Relations Area Files, which contain descriptions of societies from around the world, and the journal *Ethnology*.

Although Sanday's investigation provided support for her original model, it became apparent early in the course of research that an important source of female power lay in neither the public nor domestic domain. This source, Sanday says, was in the area of symbolism, thought, and belief about reproductive processes, part of what she calls the "symbolic realm of the psyche." To get further information on this subject, Sanday turned to creation myths—the stories primitive people make up to explain how they got here and why men are men and women are women. She was able to find origin myths for 39 of her sample societies.

Power and Symbolism

As an example of how origin myths relate to the status of the sexes, Sanday cites the Island of Bali, where men and women are equal both in myths of creation and in everyday life. According to one Balinese legend, the "original couple" came out of a coconut blossom together. Sanday finds, "This couple and those like them are usually male and female twins, which appear to be a union of the eternal male and female principles more than they are specific persons. The union of the male and female principles is of great importance in the religion around which all Balinese life revolves."

As specific examples of behavior related to symbolism, Sanday cites cultures where the sexual division of labor in such activities as food production is the same as in their creation stories.

"Where females are unimportant in creation, they contribute less to the food supply and are segregated from males in their labor." She also finds that, when maternity and the male/female unit are featured in creation stories, fathering is emphasized in the culture's behavior. Sanday believes that symbolism both influences and reflects behavior.

Psychic Matriarchies and Fear of Women

The early predominance of female symbols in old world art and archeology as well as in the early creation stories led many 19th and 20th century scholars to conclude that there must have been ancient matriarchal societies where men were subjugated by women in a classic reversal of patriarchy. Sanday says that she has found societies in her present study in which matriarchy exists, but in the sense of psychic power, not in the sense of a mirror image of patriarchy. She finds this psychic power to be the highest where women are socially the most subjugated. The core of Sanday's argument is:

> . . . Female power is always present, but not where we look for it. In societies where females are excluded from the public domain, it was discovered that they have enormous power in the domain of the psyche . . . . The degree of this power is manifest in the intense fear of women. It is this fear which leads to the development of a male collective as a counterbalancing force. It is this fear that causes women to be excluded from all male activities. Looking at this situation from the point of view of behavior alone would lead one to say that women are completely subjugated—when in fact the more appropriate way to look at it would be to concentrate on what drives males to segregate themselves so rigidly from women.

This theory will be elaborated at length in Sanday's planned book, *Male Vs. Female: The Origins and Consequences of Sexual Inequality*. "For whatever reason," she says, "if, because segregation breeds fear and the establishment of independent control spheres or whatever, there is also a very strong relationship between fear and who controls first creation." In societies where women are feared and disliked, they are unimportant in origin myths.

Sanday contrasts fearful-male/subjugated-female cultures with those, such as the Iroquois, where women have social and political power which they delegate to men. "Women don't seem to have the need to subjugate men," Sanday says. She argues that

Freud's theory of explaining women's behavior as the result of penis envy does not apply to the primitive societies she has studied. Rather, it is fear of the powers men believe are inherent in women and must be acquired by men that drives them to subjugate women. Through continuing research, Sanday is defining these female powers and the fear they hold for men in different cultures.

This fear, she concludes, must be considered when looking at the status of men and women in various cultures. By broadening the meaning of female power to include the symbolic and the psychic, Sanday believes that her work has added to the understanding of sex-related behaviors.

Recognizing the Value of One's Work
Research by: Lawrence Messé and Charlene Callahan-Levy

Do women tend to devalue the worth of their work? Do they apply different standards to rewarding their own work and that of others? These are the questions being asked by Michigan State University psychologists Lawrence Messé and Charlene Callahan-Levy. Even in this "new" society of increased sexual equality, it seems some old attitudes remain. Past experiments have shown that, when women are asked to decide how much to pay themselves and another person doing the same job, they pay themselves less. Following up on this finding, Messé and Callahan-Levy designed experiments to test several popular explanations of why women tend to "short change" themselves in pay situations.

One theory tested is that women know what is fair pay for a particular job but are unable to apply this standard to themselves, i.e., women feel that the idea of just rewards is appropriate for judging the pay of others but inappropriate for judging their own pay. Subjects for this experiment were men and women recruited from the Michigan State undergraduate student body. The job the subjects were asked to perform for pay was an opinion questionnaire requiring a number of short essays on campus-related issues. After completing the questionnaire, some subjects were given $6 in bills and change and asked to pay themselves for their work. Others were given the $6 and told to decide payment for another subject who had also completed the questionnaire.

As in earlier experiments, women paid themselves less than did men. They also paid themselves less than men and women paid other women. Differences were substantial: average self-pay for women, $2.97; average self-pay for men, $4.06; women paid by

others, $4.37. However, both men and women paid themselves more than they reported was "fair" for the job.

The investigators also found that men and women evaluated their own peformances on the questionnaire about equally and better than the expected performances of others. Women's lower payment to themselves, therefore, was not based entirely on their evaluation of their own ability. Rather, women seem to see less connection between their work (even when it is superior work) and pay. Messé and Callahan-Levy postulate that one reason women appeared more generous to others in this experimental situation is their relative indifference to receiving money for their work.

The finding that men as well as women pay women more than men suggests to the investigators that "the notion of being 'kinder' to women is congruent with the passive, dependent aspect of the traditional female sex role. Thus, if females are persons toward whom others are nurturant and protective, there is no need for them to be concerned with acquiring a reasonable amount of money for their work." Others will take care of that for them.

What Others Think

The second experiment examined the theory that women do not reward themselves fairly because they are concerned about the reactions of others and about the standard of equality (rather than equity). Women are traditionally the accommodators in our society, this theory says. Even when they know they deserve a larger share of a reward, they hesitate to take it because they are unsure that their coworker would agree that they deserve more. They opt for the even rather than the fair disposition of reward.

Subjects were paired with an unseen (actually fictitious) partner on a proofreading task and then asked to divide the money the partners had earned. Before making this division, some of the subjects were given bogus notes from their "partner" suggesting how the money be divided. They were also told that they had done better on the task than their partner.

Again, women were more generous than men to their partners, and both men and women were more generous to female partners. Women tended to comply with a request for a particular division of earnings, but only when the message was sent by a male partner. Messé and Callahan-Levy discuss three possible explanations for this finding: Women are kinder to other women, taking more when told to by a male but not a female coworker; females lack confidence in the "man's world" of pay distribution and thus defer to male judgment; and women are more concerned with

the image they present to a male coworker than to a female coworker. All three of these explanations are seen as possibilities.

The investigators conclude that their findings point the way to a number of potentially fruitful field studies of women in the work force. If women know what is fair pay for their work and yet feel they cannot ask for it because they are overly concerned with what others will think of them, their difficulties in achieving equal pay for equal work lie within themselves and not just within the male-dominated labor system. By depending on the "kindness" of their employers and not on standards of fairness, women disadvantage themselves both psychologically and economically.

2. Women's Work

"Man's work lasts 'till set of sun,
Woman's work is never done."

Anonymous

The five projects grouped in this chapter represent two new themes in research on women workers. One theme is the shift in attention from professional to blue-collar workers; the second is the dual roles of women in the spheres of work—at home and outside the home.

In the fifties and sixties, perhaps because they were such a rarity, women doctors, lawyers, and professors were a frequent topic of research. When researchers spoke of the "dual-career family," the careers were usually both professional. In these studies, the problems that concerned the women professionals who were wives and mothers were chiefly those of the upper middle class—where to get a full-time housekeeper and how to avoid feeling guilty about leaving the children when there was no economic necessity to work.

Then, sometime in the last few years, researchers looked around and discovered that there was a need to investigate the majority of working women, who were not professionals. There was also a need to examine the meaning of work—paid employment and housework—for women of all classes.

Up to this point, the existence of women in working-class jobs was acknowledged; they were just not recognized as the subjects of research. It was taken for granted that blue-collar women's only motivation for working was financial. They were seen as working at boring, repetitive factory jobs because they had to. When financial circumstances allowed them to stop working, they went home and became housewives again.

As Walshok and Lamphere have discovered, working-class women are far more complex individuals than that. They work at various jobs for various reasons, and they have evolved definite lifestyles to deal with economic hardship, dual roles, and their dreams for the future. Walshok and Lamphere's research sheds considerable new light on women in working-class jobs and, taken in conjunction with Rubin's research in chapter 3, on working-class life as a whole.

The second theme reflected in the studies in this chapter is that women, whether they work outside the home or not, are still the primary housekeepers and childraisers in this society. As the Berk study clearly indicates, if the women's movement has generated a new egalitarian family model, it isn't evident yet in Indiana. As economic conditions increasingly make it necessary for both husbands and wives to hold down paying jobs, the issue of "two full-time jobs" for working wives has become a matter of concern. How women cope with the roles of wife, mother, and worker (Lamphere, Walshok) and how they feel about these roles (Berk, Hauenstein) are subjects relevant to this concern.

One reason most women seem to accept an uneven distribution of household labor is found in a survey of historical attitudes toward women workers (Wertz). Since American society has traditionally regarded married women who work as deviant, it is not surprising that, even today, they feel a strong obligation to do as well in their traditional family duties as in their paid jobs, since home is where they feel they should be in the first place. And, as Hauenstein found in her study, the major difference in attitudes between housewives and working wives is that working wives appear less satisfied with the amount of time they can spend with their children and their housekeeping. The mental health implications of these role conflicts are obvious.

Doing Men's Work
Research by: Mary Lindenstein Walshok

Why does a woman with 6 years' secretarial experience want to become a forklift operator? For basically the same reason a man would, says California sociologist Mary Lindenstein Walshok—good pay, challenging work, and the chance to learn a new trade. Dr. Walshok found that even a "Doris Day type" with relatively traditional sex-role attitudes and no prior mechanical interest is likely to take the "male" job if given the opportunity. This finding, she says, has important implications for bettering employment policies and occupational training programs for blue-collar women.

Dr. Walshok and her University of California-San Diego research team are conducting a 2-year study of 90 women starting out in nontraditional female occupations, such as auto mechanic, plumber, and welder. They are comparing the attitudes, aspirations, and motivations of these women with 30 others employed in traditional jobs, such as beautician or small-parts assemblers. In-depth, open-ended interviews with these women explored early

childhood experiences and social background, job histories, career values, and work expectations. Ultimately, the researchers hope to pinpoint the attitudes and experiences that differentiate women in nontraditional working-class jobs from those in traditional jobs. These include how these women developed their employment interests and commitments, what paid employment means to them, and how they relate employment with their other family and community roles.

Dispelling Myths

Although Walshok's study is not yet completed, her findings have already disproved several popular misconceptions about women employed in working-class jobs. The first is that these women work only because of financial need.

Most of Walshok's subjects expected to work when they grew up, regardless of economic necessity, marriage, or children. That is, they took for granted their future role as worker as much as wife and mother. As one woman said, "I would not be happy unless I was working. Mentally happy. The good life for me right now would be with the man right now that I care the most about in the world . . . with my children, working. I have to work. I want to work to be happy."

The reasons her subjects feel this way, says Walshok, are twofold. First, many of their mothers worked while they were growing up, and they themselves were employed, often by the age of 14, earning money for personal and family expenses. While their classmates were involved in high school clubs and other extracurricular activities, these young women's interests and social activities were centered on afterschool jobs. Work became part of their personal identity.

Two other popular bromides about working-class women and their jobs are: (1) These women are content with boring, repetitive work; and (2) only white-collar jobs are complex, interesting, or challenging. Neither of these notions held up under Walshok's research. Women dislike boring work as much as men do, she found. Furthermore, they are able to find challenge and interest in skilled blue-collar jobs. One woman training in appliance repair explained why she had chosen her field:

> Right now, I really want to get into something that (is) interesting to me. Waitressing is not in a way bad, but it is dull, you know, it's the same old stuff . . . and this is why I decided I wanted training in appliance repair. I had been thinking about some kind of trade I could get in, and this seemed like it was the most interesting . . . It's just not something you automatically

> do. You think it over and figure it out, and this is the kind of work I want to get into because I think I'll enjoy it more than just more routine, routine—put it into a slot and turn it over and stamp it—that sort of thing.

"Where Else Am I Going to Make This Kind of Money?"

The above statement was made by a woman groundskeeper, but it reflects the opinion of many of Walshok's subjects. Economic concerns do play a large part in where these women choose to work. "This is not surprising," Walshok says, "since half of the women we have interviewed thus far are single or divorced heads of households. Nearly half are minority women who have either gradually moved from menial to skilled labor over time, or are women who are suffering, along with their husbands, the especially irregular employment of minority workers in periods of high unemployment."

Money is obviously a means of survival for these women, Walshok says. It is also a means of allowing them to feel that they are independent—independent from men, in particular. Walshok believes that the feelings of a number of women are summarized in the following statement by one married woman:

> Well, the pluses (of employment) are, I've never been good for asking my husband for anything. I don't want to have to ask anybody for anything. And I don't have to say, "Well, honey, can I have this or can I spend that?" Even though what I'm making now isn't that much more, I feel a lot more independent.

Not Just for the Money

Other motives for working frequently expressed by both traditional and nontraditional workers were a desire to "get out and do something" and the need to have outside communication and friendship with adults. As one subject put it, "You get to talk to people. (At) home, all your problems you keep to yourself and you see four walls and do the same things, wash, clean, do the dishes, cook . . . ." Another said, "I have to get out of the house because I just get stir crazy after about 12 hours." Even women with preschool children stressed the need to get out. "I love my kid, but . . ." was a frequent refrain.

Two "pluses" of working, most often mentioned by women in nontraditional jobs, were "it keeps you in shape" and "it offers you a chance to get ahead." Walshok's subjects delighted in telling her how much hard work their jobs involved. "You don't find too many women in shipfitting," a female shipfitter said. "I'm always a hard worker. I don't like to brag, but I like hard work."

Coupled with the desire for mental and physical challenge is the idea that challenges surmounted are accomplishments. Seeing something you fixed run, getting a merit raise, becoming a supervisor—these are solid accomplishments in which a woman can take pride, Walshok reports, especially when her previous job was as a waitress or assembly line worker. While sociologists may debate whether moving from secretary to bricklayer is "upward" or "downward" mobility, Walshok says the increased pay and autonomy of bricklaying has many of her subjects convinced that it is a step-up.

One older woman who was entering a blue-collar trade said, "Doing it made me feel good about myself. Being able to learn it, and even to some degree excel in certain areas of it, made me feel really good and confirmed some things that maybe I only vaguely thought. I always thought that maybe women could do all these things, and I always thought I could, but you have to prove things to yourself sometimes and this helped me prove it."

Walshok suggests that the working-class and low-income women she has interviewed do not have the time or money necessary for the middle-class pursuits of home decorating, gourmet cooking, craft classes, or volunteer involvement. Their social lives are centered on the family rather than extending to the community. Whereas middle- and upper middle-class women may turn to a variety of individual and community activities to find challenges and achieve personal growth, blue-collar women are more likely to look to paid employment for both economic and personal rewards.

But Will It Last?

Walshok acknowledges that some of her subjects' enthusiasm and satisfaction with their new-found "men's jobs" may be because they are pioneers and groundbreakers. Although her married subjects currently express little role conflict, she wonders whether this will change over time. Many describe their husbands as ambivalent or nonsupportive and some of their male coworkers as downright hostile to their new careers. Most report that they carry the full burden of household tasks in addition to their physical labors on the job. One woman whose shipfitting job starts at 7 a.m., describes what she does when she gets home from work on a normal day.

> I would take a shower right away and start into the kitchen. Start making dinner. She (points to daughter) would start something for us, and then I would help her finish making, or sometimes she would come in a little bit late from school and I'd have to start making

hot tortillas and make our dinner for our family. Then I'd put a load in the washing machine, or do the bathrooms, or do something in the house, because you never have time to sit down. I'd sit down about 8:30, 9:00, exhausted, then I'd take another shower and go to bed.

Perhaps when and if the novelty of their new jobs wears off and their hardships continue, these women will eventually be singing the "blue-collar blues" along with their male counterparts. Some may even return to traditional women's jobs.

On the other hand, Walshok says, continued support for women's access to nontraditional job opportunities by government and industry will undoubtedly increase the number of women in these jobs. The 1970 census shows a dramatic shift in the number of women in previously "all male" skilled trades. Most recent surveys show that this trend is increasing.

In the second year of her study, in addition to following up her subjects in their jobs, Walshok is evaluating the relative effectiveness of various types of on-the-job and vocational training environments in facilitating the movement of women into nontraditional fields. Given women's decreasing satisfaction in traditional homemaking roles coupled with the rising cost of living, Dr. Walshok sees a definite need for jobs to be restructured to meet the financial and emotional needs of both men and women.

Coping Strategies of Ethnic Working Women
Research by: Louise Lamphere

At first sight, the room seems chaotic—filled with sewing machines all rapidly whirring away, chutes of cut and partially sewn garments, and between 200 and 300 women. However, there is order in the chaos. Work comes down from the cutting room in large wooden trolleys. At the machines, women put trim on the sleeves of girls' dresses, attach collars or neck bindings, and sew shoulder seams together. As the work progresses toward the front of the department, labels are sewed at the back of the neck, and the tops and bottoms of the dresses are joined. Finally, at machines on the other side of the center aisle, the garments are hemmed, pressed, and folded and pinned or put on hangers. From here, the garments are taken off the floor, presumably to be packed and sent to the distribution center.

University of New Mexico social anthropologist Louise Lamphere spent 9 weeks in the Rhode Island apparel factory she describes here. During breaks from her job as a sleeve setter, she

talked with and observed her fellow workers, women of Portuguese, Polish, French Canadian, and other ethnic backgrounds. What Lamphere and her Center for Policy Research project team learned on the job and from interviews with other working women and their families has convinced them that working-class women are far from the passive and accepting laborers pictured in the sociological literature of the fifties and sixties. They are active strategists who exert considerable energy in making the best of a life that involves juggling the roles of wife, mother, and worker. Ethnic ties and networks of family, friends, and neighbors help these women cope with their many roles.

"Not Anybody Can Do This Work"

At the factory, the coping strategy has to do with fighting the system, in this case, the piece-rate system. Piece rates for each operation on each garment are figured through a complicated series of calculations. The "girls," some of whom have worked at the factory for 20 years, are guaranteed the minimum wage but can earn more if they complete enough pieces. This system, Lamphere found, produces inevitable pressures and conflicts.

"Not anybody can do this work—sewing," Lamphere's sewing instructor, a young Portuguese mother, told her. Several of her coworkers commented that they are doing skilled labor for low pay. "They also know," Lamphere says, "that they are constantly in danger of earning less on the piece-rate system because the quality of someone else's work may slow them down or make them have to do their work over; the differences in rates may . . . make it difficult to maintain their piece work average over the week; the rate may be low on a (difficult) style; and during a slow part of the season, a girl may be taken off her job and put on another for the minimum wage."

These workers deal with the exigencies of the piece-rate system in several ways. If a mistake is not a worker's fault or she is being treated unfairly by the floorlady (supervisor), other women are quick to come to her defense to save her from having to do the job again and lose money. Still, conflicts arise when the quality of someone's work affects another. "There's a tremendous tension," Lamphere says, "between 'just letting it (a substandard job) through' and calling the floorlady to have the girl do the work over."

In addition, Lamphere reports, "a number of informal work rules have evolved, through which sewers attempt to spread the work evenly to make sure that they are only doing their job, rather than someone else's job for which they are not paid . . . . Third, workers will clearly fight against piece rates that they feel have

274-865 O - 78 - 4

been set too low . . . . Finally, the union has an important role in guaranteeing individual jobs and in working for better pay."

Friendship on the Job

Less formal coping strategies derive from the groups formed at breaks, lunch, and for carpooling. These friendships, Lamphere found, were largely formed along ethnic and age lines. "They are important vehicles," she says, "for passing information about what is happening at work, as well as providing a collection of those who share information about family life, strategies for dealing with social services, gossip, and even sexual joking."

Despite the existence of these ethnic social groupings, Lamphere feels that the nature of the work plays an equally strong part in determining informal relationships. She says, "One is likely to talk to those of the same ethnic background and/or age who work in the next line of machines or in front or in back of one's own (machine) . . . . If a girl is moved to another department, laid off, temporarily transferred, or quits . . . those job-related ties are broken and probably not reactivated outside the work place." The individualizing character of piecework in a large, conglomerate-owned factory, Lamphere discovered, makes for tenuous work friendships.

Family Strategies

Lengthy interviews have been held with 18 Portuguese and Colombian families* to investigate coping methods used outside the factory. Eventually 30 to 40 Portuguese, Colombian, Polish, and French Canadian families will be interviewed. The first families interviewed arrived from Colombia and the Portuguese Azores within the last 10 years. Their immigration and their decision to have the wife work, Lamphere says, are part of a definite "family strategy" for coping with life in the United States. As one Azorean woman put it, "There (in the Azores), we are raised as poor people. We immigrate for this reason: because we have the need to improve our standard of living." To do this, both spouses must work, especially since the husband's job here is most often low paying, beset with seasonal layoffs, and offers the possibility of a disabling accident.

Most of the women in this study expected to work when they reached this country, just as Mary Walshok's subjects expected to work when they grew up. How else, stressed one Azorean husband, could the family pay off the loans they took out to immi-

*Interviewers are Carlos Pato, Aida Redondo, Richardo Anzaldua, Rebecca Mathews, and Filomena Silva.

grate? Many of the Colombian women held urban jobs before immigration. The Azorean women, however, are mostly from rural areas and have had to adapt to their new urban working-class position.

How do these women feel about their jobs here? One recent Azorean immigrant said about her job in a jewelry factory, "I don't dislike it; I never had another job. I don't know if it is good or not because I have not another." However, she does prefer this job to the "heavy, hoe-in-hand" field work she did back in the Azores. Other subjects definitely do not like their factory jobs, "But the salary is good, you know," said one, who earns $3 an hour, more than many minimum-wage employees in the area. "To find another job that pays well is difficult. And if one finds it, it will be with more work to do. And I would also have to make new friends."

In five of the families interviewed, the children were below the ages of 7 or 8. In these families, the parents tried to work different shifts at their jobs. Sometimes they were able to get a relative, neighbor, or friend of the same ethnic background to babysit. When asked why they prefer to use only close female relatives as sitters, one mother explained, "We Colombians understand each other."

Even with the strategies of working different shifts and using friends and relatives to babysit, mothers spoke of the difficulties of child care arrangements. "It is very difficult with two children, and the mother is the best person to take care of them," said one, who was expecting her second child. After the child arrives, she would like to work only 5 hours a day so that she could be at home when her husband goes to work.

None of the women interviewed so far uses child care centers. There are only two in the area, Lamphere says, and their costs are prohibitive for families where the women earn $2.30 to $3.50 an hour and the men $3.50 to $5.50 an hour.

Although the husbands in both the Azorean and Colombian families stay with the children while their wives are at work and take their wives shopping, the interviewers found that these husbands take little responsibility for cooking, feeding, and dressing the children or cleaning the house. The wives have a heavy burden. "Here there is no one to help me," said one. "Eight hours of working and then I have to come here to cook, to wash, to clean up, and who helps me? Nobody." In Colombia, where this woman also worked (when she was single and childless), her aunt helped with the household chores.

Interviewers are continuing to visit Portuguese and Colombian families to see if there are interethnic differences in how these groups deal with division of household labor and use of family-

and-friend networks. Other interviews with French Canadian and Polish working-class families are planned to explore similarities and differences of second- and third-generation immigrants in their coping strategies. Historical investigation in the area of Rhode Island where these four groups live is also being undertaken to understand how economic trends, work patterns, and ethnic concentrations have affected life for the working class. A survey of area social services, including health, welfare, community, and church programs, will examine how they relate to the needs of these families. The information amassed by the end of this 3-year study, the investigators hope, can be used by policymakers to help working-class women maintain their combined job and family obligations with less hardship and stress.

Housework, the Labor of Love
Research by: Richard Berk, Sarah Berk, and Catherine Berheide

Traditionally, when historians, economists, sociologists, and other social scientists have embarked on the study of work, they have turned to the factory, the office, the marketplace—anywhere but the home. Only recently have researchers come to regard household labor as a legitimate field of investigation. "And it's about time," say sociologists Richard Berk, Sarah Berk, and Catherine Berheide. "Housewife is without a doubt the most common 'occupation' in the United States.... By ignoring it, we have missed a time-consuming and necessary activity occurring daily throughout our society and have uncritically accepted the stereotyped ways in which it is conventionally understood.... If the psychological well-being of working males is related to the quality of their work environment, why not the same concern for women who labor in their homes?"

Most household work in the American family is still done by the wife, even when she is also employed outside the home, the investigators have found. Husbands and children contribute somewhat to housekeeping but do not significantly reduce the proportion of work done by the wife. Wives, for the most part, tend to accept their lot and see household work as an unavoidable but necessary part of their lives.

Just what does a housewife do all day? The Berks-Berheide study is an empirical examination into the nature of household work. Major topics of investigation include the content of household work, the division of household labor, the wife's reaction to household work, and the consequences of different work environ-

ments for household workers and their families. The pilot study for this project took place largely in Evanston, Ill., and involved 40-minute telephone interviews with 309 wives, participant observation of household work in 40 homes, and 24-hour diaries kept by 158 women. This study laid the groundwork for a future national survey on housework.

Of the 309 women interviewed in the Evanston study, almost two-thirds had at least one child living at home. These women ranged in age from 21 to 84; most of them lived in the suburbs. Roughly 40 percent were employed full time and another 20 percent part time.

As a usable definition of household work, the investigators settled on "any productive household activities associated with either home maintenance or family maintenance." One method of describing the content of household work was to show the frequency of certain tasks. The diary respondents said that 65 percent of the recorded tasks would be repeated the following day. Many noted that such a repetition gave their household routines a feeling of "neverendingness." One woman said, "I never make progress. I have to work so hard to keep even."

"Help" With the Housework

Has the current concern about changing sex roles been reflected in the division of household labor within the family? Preliminary findings suggest this is not the case. Even among younger Evanston couples surveyed, the wife said that she does most of the household work. Wives reported that they did 86 percent of the kitchen cleaning, 92 percent of the laundry tasks, 88 percent of the meal preparation, 89 percent of the straightening tasks, 74 percent of the outside errands, and 76 percent of the "other" household tasks. Even the stereotypically husbandly duties of taking out the trash and paying household bills were generally done by wives (60 and 62 percent, respectively). As the investigators suspected, what husbands and children contribute to housework is "help." Responsibility remains with the wife, and, as this study showed, "The managerial function is real work."

Contrary to some economic family models, married women employed outside the home were not found to do a significantly smaller proportion of household work. This finding, the investigators say, supports the idea that married working women actually have two full-time careers, one outside and one inside the home.

The presence of preschool children in the home appeared to have no effect on the division of labor between the parents. The investigators were at first surprised by this finding but now conclude that it is probably the *content* of the work and not its divi-

sion that is affected by the number and ages of children at home. Women with small children at home just work harder.

Less surprising was the finding that wives with domestic help do less household work relative to their husbands. Also, the more the husband earns, the less housework his wife does. Yet, husbands in more prestigious occupations such as doctor or lawyer were married to women who did more of the household work. This seeming contradiction between the economic variable (earnings) and the social variable (occupation), the investigators say, implies that "social class" is an ambiguous and multidimensional concept.

They conclude that neither purely economic nor sociological family models hold all the answers for explaining family division of labor. Families are not single-minded units, with every member maximizing his or her behavior for the welfare of the unit. Neither are families collections of individuals perpetually buffeted by norms. Rather, the findings suggest that family members are individuals making choices under a number of social and economic restraints.

Turned-Off Minds

When wives were asked to check which of the following words—enjoyable, frustrating, fulfilling, physically tiring, tedious or boring, unpleasant, difficult, or neutral—best described their feelings toward each of the eight categories of housework, "neutral" was by far the most popular description for everything but child care.

Why this lack of emotion? The investigators believe that most women see household work as "necessary" and simply turn off their minds while doing it. The diaries confirm this belief. Feelings about and values toward housework appear to have little influence on what proportion of housework a wife does. How much she does and how well she does it may be another matter. The feelings of these housewives about housework in general were summarized by one:

> This is Fred's castle—period. Oh, we have projects occasionally; once a year we'll do the windows, and I'll get on one side and he'll get on the other, and if he's around he'll sometimes mow the lawn, and he takes out the garbage. Dinner time is the hardest time. I try to get the family room cleaned up before he comes home so we can spend some time in there with the boys. Basically, I'm willing to do everything else around here as long as he puts in some time with the kids and doles out a little love.

In 53 percent of the households studied, the wife said that there was no difference of opinion concerning who should do what housework. In 30 percent of the homes, there was little difference of opinion. When husbands and wives differed on who should do what, 42 percent of the wives "gave in" regularly and another 19 percent "gave in" half the time. Most wives expressed little resentment about this state of affairs. They didn't feel that they were doing too much of the housework, nor did they feel pressured to do more work than they felt they should.

No Revolt in Fred's Castle

Why is there such acceptance of circumstances which would seem a ready source of open revolt? Although the investigators believe that the more comprehensive national study will provide a clearer understanding of this phenomenon, they have posed some possible answers. Their sample may have simply adjusted to their situations and decided to invest their psychic energies elsewhere—in talking on the telephone, visiting neighbors, watching television, outside jobs, or in more creative housework, such as sewing. The investigators also believe that, although their sample cited specific tasks as being boring, unpleasant, or neutral, they found overall satisfaction in the broader roles of wife, mother, and homemaker. Most of the women in the Evanston study felt strong emotional attachment to the household members for whom they labored. As the investigators concluded, "A labor of love may at times not seem like labor at all." Finally, these investigators disagree with those like Lillian Rubin and Mary Walshok who say that wives and mothers find paying jobs a welcome change from their work at home. Household work, they say, is no more boring than most of the outside employment available to these women and offers as much or more discretion in its timing.

The national study of household work, in addition to having a much larger sample (400 couples and 400 wives from nine regions of the country), is also probing more deeply into some of the issues raised by the pilot study. Berheide is examining how subjects decide what is labor and what is leisure activity. Sarah Berk will focus primarily on the division of labor, and Richard Berk will work with new economic models generated by the findings. All three investigators are studying behavorial problems (marital strife, drinking, drug taking) that may be associated with particular household work environments. Sarah Berk says that they also wanted to investigate such major issues as child abuse and general family violence, but found them to be too sensitive. Whereas a mother will tell you that she needs pills to go to sleep at night, she is not likely to admit that household frustrations drive her to

beat her child. However, "affect" questions on the national survey will be closely concerned with the wife's and husband's potential resentment, and the perception of household work equity, asking "Do you think it's fair?" and "Are you angry?" in reference to specific household tasks and divisions of labor. Also, further exploration of the causes and effects of housewives' "turning off their minds" should provide needed information on the mental health of this large category of workers.

People-Centered History

An interesting offshoot of the national survey is the collection of household work histories from elderly women. The investigators found that, whereas many older women cannot recall specific historical events, they can describe in detail what their kitchens looked like in 1920. Richard Berk calls this "people-centered" as opposed to "event-centered" history. The Berks feel that these personal histories will provide important insight into how changing technology (e.g., refrigeration, indoor plumbing) has altered standards and methods of housekeeping. Sarah Berk also points out that a woman who has been a housewife for 50 or 60 years knows how it feels to go from being a producer (butter churner, bread baker, food preserver) to a modern-day consumer (frozen food buyer, TV watcher). Under such changing circumstances, feelings of self are bound to undergo a change.

The investigators would eventually like to undertake a longitudinal study of newlyweds and other newly mated couples. By examining the division of household labor in these new relationships, they hope to make a thorough investigation of the causes and effects of the division of household work in the family.

Married Women's Attitudes Toward Family and Work
Research by: Louise S. Hauenstein

There are more similarities than differences in the feelings of married women about their lives, regardless of race, income, or employment. This is one finding of Louise S. Hauenstein, a University of Michigan psychologist who has just completed a study of married women's attitudes toward their family and work roles.

"There are many indications that married women in this country have problems," Dr. Hauenstein says. These problems are much discussed—role conflicts, changing marital expectations, and the stresses of managing a household amid economic uncertainty,

among others. Dr. Hauenstein is concerned with the roots of these problems. Her approach was to focus on the functions married women consider important as housekeepers or wage earners; how well they feel they have accomplished these functions; and whether they are satisfied in their present roles as workers, wives, and mothers. Additionally, Hauenstein hoped to find if housewives differed from employed wives in their attitudes toward work and their families, and whether there were racial and class factors related to these attitudes.

Hauenstein's data came from a survey of 508 married women living in four Detroit neighborhoods in 1968-69. Two of these neighborhoods (one black and one white) were characterized by low income, low residential and family stability, high population density, and a high crime rate. These were called "high-stress areas." The other two neighborhoods (also one black and one white) were middle class, residentially and familially stable, and low in population density and crime. They were referred to as "low-stress areas" in this study.

The most striking of her overall findings, Hauenstein says, is how few actual differences she found among married women of differing race, stress level, and work status. The women in the four neighborhoods had almost identical views about housekeeping. Over 70 percent said that it was very important to them to run the house well. In family attitudes, majorities of each subgroup said that it was very important to spend time with their husbands and to teach, control, and be respected by their children. Most of the women also felt it was important to get along well with their parents and other relatives.

Why are these women so similar in their attitudes toward their roles as wives and mothers? Hauenstein hesitates to draw any sweeping conclusions, but she does say that it might have something to do with the pervasiveness of American culture and the norms conveyed by the mass media. The few attitude differences that Hauenstein did find were related to economic role (housewife or working wife), race, or social class, or a combination of these factors.

Housewives vs. Working Wives

As might be expected, Hauenstein found that the biggest differences between housewives and working wives were in the responses to: "I have a good chance to spend time with the children and do things together with them" and "I have a good chance to teach and control my children." More housewives than working wives also said, "I am seldom bothered by the feeling that I'm not doing as good a job on my housework as I should be doing."

Comparisons by Race

"The biggest differences in the attitudes of black and white women," Hauenstein reports, "were on the subject of advancement—social and financial. A much higher proportion of black women said that it was very important." In terms of occupational mobility, more black housewives said that it would be easy for them to have a regular job, and more black working wives said they would like to find a better job. These "racial" differences, Hauenstein says, seem clearly the result of long-standing socioeconomic conditions.

High Stress vs. Low Stress

Women in the high-stress and low-stress neighborhoods were found to be remarkably similar in their attitudes, except for attitudes related to their current socioeconomic condition. In high-stress areas, the women were much more preoccupied with money and social advancement. Like the black women, and probably for the same economic reasons, these women showed an active interest in getting a job or moving to a better one.

Comparisons by Neighborhood

The women in the black high-stress neighborhood were the most concerned with the importance of having more money, of personal advancement for themselves and their husbands, and of job security. These women were the least satisfied with their marriages but reported the greatest show of appreciation from their children and tended to rate themselves as good mothers.

The black women in low-stress areas felt "exceptionally secure" about their financial situation, especially about living within their income. Many of these middle-class black women said they felt that they had done very well in getting ahead and moving up in the world.

The white women in high-stress areas who had jobs were distinguished by their financial pessimism. Fewer said they had a good chance to earn a higher wage or that they thought there would be more need in the future for people doing their kind of work. The white women in low-stress areas, on the other hand, were by far the least concerned with money or advancement. They were the most satisfied with their marriages and reported the least disagreement with their husbands. However, these women also reported the least appreciation from their children, and fewer said they performed well in the maternal role.

Since these women come from four extreme socioeconomic environments, Hauenstein cautions that the findings cannot be

generalized to the entire population of American married women. However, she says that her findings do offer comparisons across social class, race, and economic role. Hauenstein hopes that her continuing research on the impact of such variables as age, family income, number of children, financial worries, and satisfaction with role of housewife or working wife will further improve studies of marital attitudes.

Research on Women Workers
Research by: Dorothy Wertz

No social research is value free, says sociologist Dorothy Wertz, and research on working women, a controversial subject, is especially emotion laden. The impact of this emotion has been and continues to be seen in research policy and social legislation relating to women and work.

A survey of health research on women workers and their families, undertaken by individuals, foundations, and Government agencies between 1870 and 1970, has convinced Dr. Wertz that this research contains a traceable succession of cultural values about women, their roles, and their physical and mental makeup. Understanding these values, she says, helps illuminate some of the underlying biases in current research.

Peculiar and Unique Machines

From 1870 to World War I, Wertz found the prevalent motive for research on women workers to be the protection of the morals and health of women and children—the weaker and inferior members of society. Nineteenth century researchers, Wertz says, based their investigations on several widely held Victorian opinions about women: Married women who worked outside the home were deviant and were jeopardizing their morals, their health, and the health of their children. Women were "peculiar and unique machines," whose special engines required upkeep which was inconsistent with industrial labor. A woman's limited energy could go into either education and employment or reproduction, but certainly not both; and there was no question but that motherhood was a woman's highest calling. These sentiments are expressed with religious fervor by two widely read nineteenth century research contemporaries quoted by Wertz:

> . . .the normal, the God-appointed work of woman, wherein lie her full equality, her peerage, her glory,

and her power, is that of the home and the mother, the rearer, the trainer, the blessing of man.

Azel Ames, Jr.
Sex in Industry: A Plea for the Working Girl.
Boston: 1875

In all situations and pursuits of life, the Almighty has established bounds or limitations beyond which woman cannot go without defeating the primary objects of her creation: Maternity is the primary law of her creation.

Nathan Allen, M.D.
Medical Problems of the Day
Boston: 1873

Well-Meaning Reformers

Wertz found during the Progressive Era (1908-1924) that the focus of research on women workers shifted from the almost total attention to morals to a concern about socioeconomic conditions of the urban poor. Progressive Era researchers (many of whom were also social reformers) recognized that poor working conditions caused injury and illness, but they still tended to condemn female employment in general rather than contemplate the results of improved working environments.

The intention of a lot of this research, Wertz points out, was to influence the labor legislation of the time. Nineteenth and early 20th century protective labor laws limited the number of hours a woman could work and the type of job she could hold, banned night work for women, and segregated the sexes in many industries. The motives of the researcher-reformers (many of them women) who initiated this legislation were sincerely protective, but many employers used the protective labor laws as an excuse for not hiring women at all.

After World War II, Wertz finds that a major theme in the research literature was the mental well-being of children of working mothers. She reports that these studies no longer dealt with the morals of working women, but they did carry on the assumptions that women do not have to work and that work is unnatural for married women and detrimental to their families. Not until 1960 or so did women's studies start to show some mixed assumptions, taking into account such factors as the quality of the time the mother spends with her children and the effects of her feelings about her job or her home life. Finally, after passage of Title VII of the 1964 Civil Rights Act, Wertz concludes that quality of opportunity for women in employment has become a key research concern of the late sixties and early seventies.

An End to Bias?

In regard to the social science research of the 1970's, Wertz believes improved statistical and analytical methodology has advanced objective results to some extent, but that researcher bias still affects the studies undertaken and colors the conclusions drawn. The pendulum in many respects has swung too far the other way. Today there is danger, Wertz reports, that "a laudable desire for justice" could lead researchers to overlook sexual differences in the name of equal opportunity. As a result, problems pertaining only or mainly to women (e.g., maternity leave and child care) might not receive the attention they deserve.

In regard to the field of occupational health research, Wertz says that there is a pressing need for studies providing health guidelines on tolerance levels for all workers, with special emphasis on pregnant employees. Wertz also cites a need for more research on job discrimination and on the value of work as a whole for both men and women.

As Wertz points out, research on the health of women workers has played a crucial part in the writing of such legislation as the protective labor laws. In addition, the results of health research eventually reach the popular press and may influence women's decisions on whether to work and employers' decisions on whether to hire them. In the light of such influence, Dr. Wertz finds it a social necessity as well as a matter of academic interest to look at the underlying values that continue to affect attitudes, legislation, and behavior.

3. Marriage, Divorce, and After

"Nature has given women so much power that the law has wisely given them little."

Samuel Johnson
Lexicographer and Author 1709-1784

Despite all the talk of a "brave new" or "degenerate" American society (depending on viewpoint), certain traditions remain—among them, marriage. Almost all women get married at one time or another, and the satisfaction a woman receives from her marriage varies greatly according to a number of factors. What the studies in this chapter demonstrate is how marriage, divorce, and single parenthood affect the attitudes and lifestyles of different groups of women.

Rubin's study of working-class women and their families was initially intended to examine the impact of the women's movement on working-class wives. After a few interviews, she realized that she could not fully understand these women without also interviewing their husbands and seeing how attitudes were affected by family living. The picture Rubin draws in these husbands' and wives' own words dramatically illustrates the limitations of lifestyle options for those who are literally trapped in the American working class.

The study by Bumpass and others on the impact of a woman's age and fertility on her marriage is significant for several reasons. Like Karen Mason in chapter 1, these investigators demonstrate that new insights can often come from "old" data. More importantly, they provide specifics on the circumstances that tend to lead to marital instability. Perhaps increased publicity of these circumstances provided by both Bumpass and Rubin can help prevent so many women from marrying too young and having children too quickly.

The Weitzman study is still in progress and will eventually examine numerous aspects of how divorce and divorce law reform affect husbands, wives, and children as well as society as a whole.

Preliminary findings suggest, however, that it is former wives who are most affected in the economic plunge that often follows divorce.

The Hernandez and Wilkinson studies are included in this chapter because they represent some of the current research that is confronting generalizations and myths about low-income women as family heads. Like the working-class mothers in the last chapter, these women are making active efforts to cope with their economic situations and hold their families together. Their problems are of no small significance, since 12 million American families—one in eight—are headed by women. The unemployment rate of women heading households is at least 50 percent higher than that of male household heads. And, as Weitzman and Dixon demonstrate, even in a State with enlightened divorce laws, few former wives are awarded the custodial support they need to stay home and care for young children.

Working-Class Marriages
Research by: Lillian Breslow Rubin

"American working-class family life has a rationale and integrity of its own, a quality of life that is distinctly related to class position." This life is frequently painful and hard: "The affluent and happy worker about whom we hear so much seems not to exist." These are the conclusions of sociologist Lillian Breslow Rubin, drawn from a hundred interviews and a thousand hours spent talking with working-class husbands and wives. In these interviews, her subjects spoke of their pasts, their marriages, their jobs, their values, and their dreams for their children. Dr. Rubin hopes to use this information to dispel some of the misconceptions with which American society views its white working class. Perhaps, then, she says, society can relate to these people on their own terms.

Rubin's subjects were 50 white, working-class couples and a comparison group of 25 white, professional, upper middle-class couples. Rubin is well-known in the San Francisco area as a marriage and family therapist as well as a sociologist. She has done previous research with working-class families in communities surrounding the city. As a result of these community ties, and perhaps because she herself is a child of a working-class family, Rubin had little trouble getting people to talk to her about their lives. Her interviews often lasted as long as 8 hours and involved several trips to her subjects' homes. She reports, "It says something to me of the profound loneliness of such people, that they would be eager to speak to a stranger."

"Worlds of Pain"

Rubin calls the book she wrote based on these interviews *Worlds of Pain*, because that is what she believes she has found. Most of these working-class people were born into families where material deprivation was a fact of life. Even though these men and women still live on the edge of financial disaster with their own families, they don't feel that they have a right to complain because "Our folks had it a lot worse." As one young wife described her childhood:

> My parents didn't have a lot to give us, either in things or emotions. I don't blame them; they couldn't help it. They did their best, but that's just the way it was. They were young, and their lives weren't any fun either. They were stuck together by their poverty and their five kids.

Almost half of Rubin's working-class subjects suffered the experiences of parental alcoholism, divorce, and/or desertion sometime during their childhoods. They married young (on the average, 18 for the women; 20 for the men), many to escape unhappy homes. Forty-four percent of the couples got married because the women were pregnant. "I always figured if I messed around with anybody where it (pregnancy) happened, I'd have to marry her. All of us guys did," explained one young husband. Rubin found this to be an almost universal working-class expectation. "Of course, if you get pregnant, you get married; everybody does," said one woman, pregnant and married at 17.

When asked what they value most in their husbands, a large number of women answered, "He's a steady worker, he doesn't drink, and he doesn't hit me." These attributes, Rubin says, did not always apply to their fathers.

Although these working-class families have a median income of $12,300, most are struggling financially to keep their heads above water. The trappings of the good life—the house, the "time-saving" appliances, the car, perhaps a boat or camper—all require time payments and overtime work which use up the leisure time for which they were purchased. The frustration this situation produces is expressed by one husband:

> We bought the camper because we thought it would be a cheap way to get away weekends. There's nothing I like more than going up to Clear Lake with the family—fishing, swimming. But, Christ, I've been working every Saturday for the past 16 months, so there's no chance to use the - - - - thing.

Rubin's working-class subjects have hitched their wagon to a star—the American dream of material success. Their star has elud-

274-865 O - 78 - 5

ed them. "Buying the goods may be easy," Rubin says, "keeping and paying for them is another problem—nagging anxiety from which there is no relief." The first response of 70 percent of both husbands and wives to "What would you do if you inherited a million dollars?" was "I'd pay off my bills." Not one upper middle-class subject gave the same response. "It is not that such families do not have bills," Rubin explains; "Rather, their failure to mention them stems from their relatively secure knowledge that (professional) annual incomes are high and climbing." Blue-collar workers have no such assurance.

Causes of Marital Strain

Within the working-class marriages, Rubin found, "Household chores, when shared at all, are divided as they have been historically." This was true also in the professional families (as in the Berk study in chapter 2), but in the working-class families, the wife is less likely to have outside help. She is also less likely to hold the conviction that her husband *ought* to share household responsibilities. Husbands, for their part, come home from work benumbed and exhausted. While waiting for dinner, they "drop dead in front of the TV," as one subject put it.

In addition to their duties at home, 58 percent of Rubin's working-class wives had outside jobs, most part time. Although it is a point of family pride for a working-class woman to say "I don't have to work," most do have to. Because their working is a necessity, however, they tend to have less guilt than their middle-class contemporaries about leaving their children to the care of others—as long as these others are relatives or neighbors and not alien child care centers.

Although the jobs the working-class wives held were often menial, they frequently found them a welcome relief from housework and child care. These women work for the same reasons as the women in Mary Walshok's study—money plus the feeling of competence and independence. Still, there are mixed feelings within the family about the wife's employment. Because a working wife runs contrary to the working-class cultural myth of the all-competent, all-providing male and the helpless, dependent female, marital conflict often results. As one husband put it: "I think our biggest problem is her working. She started working and she started getting too independent. I never did want her to go to work, but she did anyway. I don't think I had the say-so I should have."

"The Marriage Bed"

Another source of marital strain encountered by Rubin was changing sexual expectations brought about by the sexual revolution and the women's movement. Many of the working-class women she interviewed were frankly confused about what was expected of them now that the forbidden has become commonplace. Although these women were all under 40, they found such new sexual norms and practices as oral sex hard to accept, given their traditional upbringing. One 28-year-old mother of three, married 10 years, explained:

> I always feel like it's not quite right, no matter what Pete says. I guess it's not the way I was brought up, and it's hard to get over that. He keeps telling me it's okay. But I'm not sure about that. How do I know in the end he won't think I'm cheap?

Compounding the wife's ambiguity on the subject of sex are the mixed messages she receives from her husband. He says he won't think less of her. But can she be sure? Even within marriage, it seems, there are things a "good girl" doesn't do. As one young husband told Rubin:

> No, Alice isn't that kind of girl. Jesus, you shouldn't ask questions like that. (A long, difficult silence.) She wasn't brought up to go for all that (pause) fancy stuff. You know, all those different ways and (shifting uncomfortably in his chair, lighting a cigarette, and looking down at the floor) that oral stuff. But that's okay with me. There's plenty of women out there to do that kind of stuff with. You can meet them in any bar any time you want. You don't have to marry those kind.

In addition to their feelings of ambiguity about sex, Rubin also found that these working-class couples had communication problems regarding sex and love. The wife says: "I want him to talk to me, to tell me what he's thinking about," while the husband replies: "Talk! Talk! What's there to talk about? I want to make love to her and she says she wants to talk. How's talking going to convince her I'm loving her?"

Working-Class Blues

Outside the bedroom, Rubin's couples also experienced communication problems which were reinforced by sex-typed stereotypes about how men and women should act and feel. These problems exist across class lines, Rubin says, but she feels they

may be felt "more keenly and with more bewilderment" in working-class families where neither language nor behavior has been developed to deal with new values. Family life is also affected by the husband's alienation from a low-status, often boring job which offers him little opportunity for advancement once he is past 30.

If this picture appears totally bleak, Rubin doesn't intend it to be. She says, "Are there good times? Yes: a birthday remembered with joy, a happy Christmas, a loving and tender moment between wife and husband. But they stand out in memory as unique and treasured events, momentually important because they happen so seldom, because they are so little a part of daily experience."

When asked what they want for their children, working-class parents say, "I want them to be happy, to have all the things we couldn't have." As for their daughters, they want them "not to marry so young."

Does Lillian Rubin think that the children of her subjects will have different lives from their parents? No. "There's no room at the top and little room in the middle . . . . No matter what changes people or groups make in themselves, this industrial society requires a large work force to produce its goods and services—a work force that generation after generation comes from working-class families. These families reproduce themselves not because they are somehow deficient or their culture aberrant, but because there are no alternatives for most of their children."

Rubin suggests that, rather than continue to develop programs to change the culture of the working class, the upper middle- and middle-class establishment adapt its institutions to helping them. When the working class has neighborhood child care centers which mothers can trust not to subvert their working-class values, and when mental health centers hire those who can relate to the specific frustrations and difficulties of working-class life, Rubin believes that perhaps some of the pain of working-class life can be reduced.

Marriage and Childbearing
Research by: Larry L. Bumpass

In this young-thinking, youth-seeking society, youth may well be a woman's greatest liability when it comes to marriage and childbearing. Sociologist Larry L. Bumpass and his research team at the University of Wisconsin have completed an expanded analysis of data from the 1970 National Fertility Study that shows that a woman's age at marriage is a vital factor in determining what follows for her and her family.

Perhaps the most startling statistic from this study is that one-fourth of the sample who had married while pregnant before they were 20 had a third child within 3 years. "For many young women," the investigators say, "the experience of premarital pregnancy defines their life options with a vengeance, as they reach their early twenties already enmeshed in the responsibilities of caring for an above-average-sized family." In addition, they note that early childbearing can adversely affect the health of the mother and infant, the economic welfare of the family, and the marital stability of the couple.

How Many Children and When

Whereas starting a family early often may mean having several children while young, the investigators also found that "later means fewer." Women who delay the start of their childbearing tend to have fewer children than those who start earlier, despite the fact that the older group has more than sufficient biological reproductive time to have additional children.

The investigators say that the answer to the question, "How old is too old to have children" is determined more by the childbearing pace of a couple's peers, the couple's own life plans, and the expectations of family and friends than by biological limits. They believe that too little attention has been paid to this social definition of childbearing age as a determinant of fertility. On the average, the women in this survey cited 21.8 as the ideal age to have a first child and 30.8 as the ideal age to have a last child.

The fertility survey polled 5,597 white and 1,155 black women from around the country. All were under the age of 45 and had been married at least once. The survey questions covered their age at first marriage, whether they and their husbands were of the same religion and educational level, whether they continued their education after marriage, their childbirth histories, employment experience, sex-role attitudes, and possible separation, divorce, or remarriage.

Education and Employment After Marriage

The number of years in which women are no longer having or raising children is increasing. What are they doing in these years? The investigators found that there is a growing trend for women to return to school after marriage. This is especially true for women who attended college before marriage, married early, or became separated or divorced. Education after marriage is also more common for women who support egalitarian sex roles or who have professional, managerial, or administrative occupations.

Dr. Bumpass and his colleagues also found a marked increase in the number of mothers who were employed while their children were still at home. Close to one-third of the women surveyed worked at some time during the 2 years after the birth of their last child.

Although more mothers of young children are working, the investigators found that these women do not approve of the employment of mothers of preschoolers. In addition, the number who perceive their husbands as approving of their employment is less than the number who work. Why, then, are they employed? Economic necessity, not surprisingly, seems to be the most important factor. At the same time, women in professional and managerial occupations are also likely to work when their children are young. In light of the growing numbers of working mothers, the investigators suspect that increased popular acceptance will eventually follow.

Predictors of Divorce

A popular idea about divorce is that higher marital instability is associated with premarital pregnancy. Although the investigators found this to be the case in this survey, they say that it is not necessarily a matter of cause and effect. Women who marry because they are pregnant are usually quite young. Even after variables of education and religion are ruled out, the earlier the marriage, the higher the rate of marital instability.

Another popular notion that proved to be a myth is that couples who marry while the man is in school or in the armed forces are more likely than others to divorce. Analysis of survey data showed that these couples are no more prone to marital instability than others, once age has been accounted for.

The factors that were found to be associated with higher rates of separation and divorce besides age are low socioeconomic status, husband's occupation being socially below that of the wife's father, wives' premarital employment, and short engagements (less than a month). A larger proportion of black subjects were separated or divorced in their first marriages than were whites. The investigators were not able to account entirely for this racial difference, even after ruling out such variables as wife's age at marriage, wife's education, status of first pregnancy and birth, and wife's religion. Additional variables such as socioeconomic status, they say, might go further in explaining this finding.

The lowest rates of marital disruption were found for women who married farmers. In a highly urban society, the investigators suggest, farm families may be more traditional in their views on the importance of marriage.

Births Between Marriages

"Childbirth during marital disruption is found to be a surprisingly frequent occurrence," the investigators say. Among women who remarried, more than a quarter had a child between the end of their first marriage and the beginning of the second. Many of these births occurred in the first year after the women separated from their husbands.

What these figures show, the investigators say, is that many children who are not technically illegitimate (because they were conceived or born within a legal marriage) still begin life under the social and economic conditions of illegitimacy and single parenthood. These children and their mothers do not receive the support they need because their situation has not come to the attention of policymakers or the general public.

Births between marriages were found to be more common among blacks, among women of lower education, and among those who had a premarital birth. However, the most important variable was, again, age. Almost half the women who separated as teenagers had a postmarital birth. This was true for less than 1 in 10 who separated in their thirties.

A woman's age at marriage is an important factor in predicting whether her marriage will be stable, how large a family she will have, and whether she will conceive or bear children outside of marriage. What is needed now, Bumpass and his research team say, is public policy and social programs to deal with the social, economic, and contraceptive implications of these findings.

Alimony as an Instrument of Justice
Research by: Lenore Weitzman and Ruth Dixon

Since 1970, major reforms in divorce law have changed the nature of American divorce. Or have they? Preliminary findings of a study being conducted at the University of California (Davis) indicate that neither traditional nor no-fault divorce laws can adequately deal with the economic problems faced by most divorcing women. The new law helps some, but far from all, of these women. Mothers of preschool children and older homemakers are two groups whose situation has actually worsened since the new legislation.

As the first no-fault divorce law enacted in the country, the California Family Law Act of 1969 provided sociologists Lenore Weitzman and Ruth Dixon with a real-life laboratory in which to evaluate the law's impact on divorce and its participants. In addition, the investigators had the assistance of Family Law professor Her-

ma Hill Kay. Besides being an expert on divorce, Dr. Kay was also instrumental in the drafting of the California law.

By eliminating fault and substituting financial need as the basis for awarding alimony (now called spousal support), this new law seeks to improve the lot of three groups of former spouses: Those who were formerly unemployed and need time to become self-supporting, those who are caring for young children, and older housewives who cannot reasonably be expected to support themselves. To assess whether the new law does, in fact, offer more aid to these groups of individuals than the old law, the investigators compared California court records for 1968 (2 years before the new law went into effect) with 1972. They also interviewed 169 attorneys specializing in matrimonial law and all Superior Court justices hearing family law cases in San Francisco and Los Angeles Counties.

Alimony Declines

As they expected, they found a decline in overall alimony awards. In 1968, alimony was awarded in 20 percent of cases. In 1972, this figure was 15 percent. There was a similar decline in fault as the basis for alimony awards. The new law has also brought about a shift from permanent to transitional awards, recognizing that some women need support while getting back on their feet financially. In addition, wife's employability is much more a factor in the judges' decisions on whether and how much alimony is awarded.

"However," the investigators report, "in contrast to the explicit aims of the new law, most mothers of preschool children are not awarded custodial support." In fact, the decline in alimony awards from 1968 to 1972 was sharpest among mothers of preschoolers. In 1972, only 11 percent were awarded alimony.

When questioned on this point, 68 percent of the judges said that they thought most judges in this day and age would want a woman with young children to work. "Faced with a choice of ordering support for a full-time mother or making her a self-supporting part-time mother," the investigators say, "judges may now consider the latter goal more important." Employment is good for women; it's healthy and normal, judges feel. Plus, they say, staying at home is not really an option for most divorced women—few of their former husbands earn enough to support two households. In addition, the median child support award in 1972 was $75 per child per month, probably not sufficient to raise a child without additional income.

Older housewives, too, face economic hardships under the new law. Of the Los Angeles women who were married for more than

10 years and were listed as housewives in the court records, only 34 percent were awarded alimony.

Thus, the investigators report, California's new law is failing two of the groups it was most designed to help: mothers of young children and older housewives. In addition, while 15 percent of divorced women in California are awarded alimony now, under the old law the figure was only 20 percent. Alimony is not now and apparently has not ever been a means of support for most divorced women. This is especially true when one considers that this study deals only with alimony awarded. Alimony actually collected is frequently less yet.

The Alimony Myth

California is not unique in its low proportion of divorced women receiving alimony, the investigators say. In a 1975 national poll of divorced wives, only 14 percent said they were awarded such support. Why, then, is it "common knowledge" that most women are awarded alimony? Even judges and lawyers who should know better from experience have this misconception. When asked to guess at the percentage of divorced women actually being awarded alimony, the judges and lawyers in this study estimated, on the average, 75 percent.

The roots of the alimony myth, the investigators believe, lie in the high visibility of upper middle-class and high-income divorce cases. "Although these cases comprise only a small percentage of the total number of divorces, it is these cases in which alimony is more commonly awarded, and it is these cases which make case law, generate publicity, and form the basis for folk wisdom about alimony and divorce."

"There is, in fact, a dual system of family law," the investigators conclude. "Both the new alimony and the old alimony are effective instruments primarily for the men and women in the middle and upper classes. Neither the old alimony nor the new alimony deals with the economic problems that lower class women face after divorce, and the vast majority of divorced women fall into the latter group."

The investigators currently are studying court records from 1976 to determine whether the differences in alimony awards between 1968 and 1972 are the result of the new law or merely reflective of ongoing changes in American society. They will also compare differences in child support and child custody.

To get a clearer picture of the social and psychological effects of divorce and divorce law reform, Drs. Weitzman and Dixon are also interviewing a number of divorcing couples in the Los Angeles area. These interviews will focus on the economics of the mar-

riage; factors leading to the divorce; the role of the law, lawyers, and the legal process in determining the divorce outcome; perceptions of what is an equitable settlement; and the amount of trauma (sleeplessness, increased drinking) associated with the divorce. Indirectly, by talking with parents, the investigators hope to be able to find out how divorce affects their children.

These are not legal issues. However, a stated objective of the California legislation was to reduce the hostility and acrimony that often are present in fault-oriented divorces. The investigators are interested in seeing if it has in fact accomplished this objective. In addition, they want ultimately to gain a better understanding of the interaction of legal institutions and family mental health.

Aspirations of Chicana Mothers on Welfare
Research by: Deluvina Hernandez

The popular stereotype pictures welfare mothers as passive, unambitious women, content to sit back and live off the system. This is a picture that a current San Antonio, Tex., research project is trying to change. Life-history interviews with 17 Chicana mothers have indicated to sociologist Deluvina Hernandez that these women do not want or intend to remain on welfare. They are "fighters," who see education as their ticket to a better life for themselves and their children. Several are working to complete high school and don't plan to stop there.

Most of these women, Ms. Hernandez says, married young and dropped out of school. When their marriages broke up, many of them already had three children or more. Without child support and without job training, they had no choice but to go on welfare. Life in San Antonio's public housing complexes is not easy for these families, Hernandez found. The mothers worry about their children taking drugs, getting involved in crime, or dropping out of school. Many of the older children are deeply ashamed because the family is on welfare.

The welfare system and local manpower programs are failing these women and their families, Hernandez believes. The only jobs these mothers are offered through these agencies are low-paying, unskilled jobs, such as laundress or assembly line worker in tortilla or taco factories. These jobs do not provide salaries high enough for the women to leave welfare.

Still, these Chicana mothers continue to be optimistic and eager to find better jobs. When asked to make up a story about "Maria," a young woman with children on welfare, their stories always had a happy ending: Maria got a job.

Will Hernandez's "Marias" eventually get the jobs they aspire to—real careers? Hernandez thinks it will require training and placement assistance from social service agencies to do so. As long as the only alternative is the taco factory, these women will be forced to remain on welfare.

Mothers and Sons: Childraising in Black, Female-Headed Families
Research by: Charles B. Wilkinson

Does growing up poor and fatherless condemn a black male child to a life of failure? "Not necessarily," suggests a current study. A mother's socialization practices and her ability to utilize community resources may be decisive factors in providing her son with the social skills which lay the foundation for later academic and vocational success. The mother's ability to use community resources is directly related to their availability.

Dr. Charles B. Wilkinson of the Greater Kansas City, Mo., Mental Health Foundation interviewed 101 black adolescent males and their mothers. The mother had been the sole parent in the family since the son's infancy. Wilkinson's objective: To pinpoint the childrearing practices, maternal lifestyles, and environmental conditions that encourage school achievement and social competence in black adolescent males. Looking at the lives of these young men from birth to age 16, Wilkinson found that the factors that facilitate success could be defined and traced.

Findings suggest that a mother's lifestyle and patterns of community activity do influence her son's achievements. Wilkinson found that these mothers were active outside the home, especially when there was community support. Their activities ranged from employment (when jobs were available and family conditions allowed) to involvement in church functions. A mother's community involvement, Wilkinson says, appears to provide the basis for the development of her son's social skills and his competence in community activities.

Academic achievement, Wilkinson found, seemed most related to the mother's socialization practices within the home. Mothers who stressed working and education tended to have sons who had higher grades and spent more time in educational settings.

Given a reasonable amount of community resources, Wilkinson concludes, "black female-headed households can function effectively as family units and need not reproduce the problems of poverty, delinquency, and mental health so often confronted in the urban environment."

4. Women and Depression

"No temper could be more cheerful than hers, or possess, in a greater degree, that sanguine expectation of happiness which is happiness itself."

Jane Austen, 1775-1817
Novelist

More women than men suffer from depression. This has been the finding of numerous surveys and clinical studies. The questions that continue to puzzle researchers are "Why is this so?" and "What can be done about it?"

Female depression, clinicians emphasize, is not the discontent of bored housewives. Depressions are often long-term patterns of pathological emotional symptoms, frequently accompanied by physical distress. These symptoms include feelings of worthlessness, guilt, helplessness, and hopelessness; anxiety, crying, suicidal tendencies, and loss of interest in work and leisure activities; impairment of everyday social relations; and physical complaints, ranging from insomnia to extreme changes in weight. The women who suffer from severe depressive symptoms often are impaired in many aspects of their lives—as mothers, wives, workers, and as individuals. The results of this impairment are seen in doctors' offices, hospitals, and mental health facilities, though many cases go untreated.

There are basically two approaches to the question of why more women than men are depressed: the psychosocial and the biological. The psychosocial viewpoint holds that cultural and personal aspects of women's lives are conducive to depression; that is, more women are depressed because more of them lead depressing lives. The biological approach says that there are biochemical factors that may make women more prone to depression than men, that substances in their brains are playing with their emotions.

As antithetical as these two approaches sound, the difference is a matter of emphasis and not absolutes. Most researchers agree that, just as there is no one type of depression, there is no one cause or treatment.

Reviewing the Theories
Research by: Myrna Weissman and Gerald Klerman

Epidemiologist Myrna Weissman of Yale University and the Connecticut Mental Health Center and psychiatrist Gerald Klerman of Harvard and Massachusetts General Hospital are two researchers who, together and separately, have investigated many aspects of female depression. Recently, they completed a review of various explanations for the sex difference in depression.

"The sex difference is a 'real' finding and not an artifact of reporting," Drs. Weissman and Klerman say. Studies show that women do not experience or report more stressful events in their lives than men do. Neither do they judge life events as more upsetting. Although women go to doctors more often, differences in men's and women's help-seeking patterns do not account for the predominance of depressed women in community surveys. While it is possible that some depressed men are "hidden" in the populations of male alcoholics and criminal offenders, Weissman and Klerman find this a debatable proposition.

Having presented evidence that the sex difference is real, the investigators then proceeded to examine genetic, hormonal, psychological, and social theories which attempt to explain the greater incidence of female depression. They considered 173 publications on the subject.

Weissman and Klerman were unable to discover a consistent pattern relating hormones to clinical states of depression. "However," they say, "it must be emphasized that no study could be located that correlated clinical state with female endocrines, utilizing modern endocrinological methods or sensitive quantitative hormonal assays."

The investigators found strong evidence of a connection between the postpartum period and depression. However, if any hormonal abnormality is involved, they say, its mechanism is not understood. Contrary to widely held views, menopause appears to have no effect in increasing the rate of depression among women.

Looking at the psychosocial explanations for depression, Weissman and Klerman found two major "pathways": the social status hypothesis and the learned helplessness hypothesis. The social status hypothesis, they say, emphasizes how social discrimination makes it difficult for women to achieve mastery by direct action and self-assertion. These social inequities can lead to "legal and economic helplessness, dependency on others, chronically low self-esteem, low aspirations, and ultimately, clinical depression."

"Learned helplessness," a term coined by M.E.P. Seligman, refers to aspects of a young woman's socialization that teach her to accept and value "feminine" helplessness. The learned helplessness theory of depression, according to the investigators, holds that "socially conditioned, stereotypical images produce in women a cognitive set against assertion, which is reinforced by societal expectations." Because women are limited in their responses to stressful situations, helplessness and depression are often the only reactions they can muster up.

How strong are these two theories? The most convincing evidence that social role may contribute to depression among women, the investigators say, is Gove's* data suggesting that marriage has a protective effect for men but a detrimental effect for women. If more married women than single women are depressed, then elements of the traditional marriage role (including role conflicts) may indeed play a part in female depression.

As for the theories relating female depression to the women's movement, rising expectations, and/or recent social change, the investigators say recent short-term trends in depression rates do lend support to such hypotheses. However, these theories do not explain why, even in the 19th century, more women than men were depressed. Weissman and Klerman conclude that no one theory totally accounts for sex differences in depression or explains both long-term rates and recent increases in rates among some groups of women. In addition, they say, different types of depressions probably are related to different biological and/or psychosocial conditions. They suggest that future research concentrate on broad-based community surveys, using consistent diagnosis and reporting methods. They also see a need for longitudinal studies of women not in traditional roles, more cross-cultural studies, more research on the relationship between hormones and mood, and further investigation on the genetic inheritance of depression.

High-Risk Groups for Depression
Research by: Marcia Guttentag and Susan Salasin

The greatest recent rise in the national rate of depression, treated and untreated, another study has concluded, is among young, poor, female heads of families and young married mothers working in low-level jobs. Utilization rates of State, county, and community mental health facilities, as well as several recent mental health surveys, provided the data for these findings.

*Gove, W.R. The relationship between sex roles, marital status and mental illness. *Social Forces* 51:34-44, 1972.

Dr. Marcia Guttentag of Harvard University and Ms. Susan Salasin of NIMH were the codirectors of a large-scale collaborative study on women and mental health services. From NIMH data and other published sources, they compiled the following facts about rates of depression for men and women:

- Twice as many women as men are diagnosed as suffering from depressive disorders.
- In all types of facilities except State and county mental hospitals, depressive disorders are the leading diagnoses for women. In State and county mental hospitals, schizophrenia is the leading diagnosis for women, with depression second.
- Depressive disorders peak in women between the ages of 25 and 44 and account for between 39 and 49 percent of the total disorders for women in this age group admitted to mental hospitals.
- Among married women, a high-risk group for depression is mothers whose children are living at home.
- There are indications that the rate of depressive disorders is increasing in general. In community mental health centers in 1971, the diagnostic category with the largest percentages of new patients was "affective and depressive disorders."

What could be the causes of the high and perhaps growing rate of depression among women, especially among young, poor mothers? Guttentag and Salasin favor an explanation called the "combined learned helplessness-life stress model." According to this theory, the highest rates of depression occur among people who have "the greatest number of stresses, or life demands, with which they must cope, and at the same time the fewest possibilities for mastery over them." By these standards, the investigators say, single family heads, who nationally have a median income of $4,000, and low-income, working-class married women with young children and low-status jobs are prime candidates for depression. Both groups face economic difficulties in providing for their families. Most of those who work have boring, dead end jobs in addition to their responsibilities at home.

The picture that Guttentag and Salasin paint of these working- and lower-class women is very similar to Lillian Rubin's in chapter 3—no money for babysitters, recreation, or household help and little time for themselves as persons. Nagging financial worries plague these women, and they have no one to turn to for financial or emotional assistance. As Rachelle Warren points out in chapter 6, working-class women often receive little support from husbands, coworkers, neighborhood organizations, or mental health professionals. Having no social power and receiving little or

274-865 O - 78 - 6

no outside help, many of these women become depressed. Their lives are depressing.

"But why should there be a rise in depression for this group over the past 15 years?" the investigators ask. Increasing role conflicts and demands as more of these women enter the labor force, they suggest, might be one reason. Because working-class women face more traditionally sexist family-role requirements than middle-class women, they experience more stress in fulfilling their multiple roles.

Social Supports for High-Risk Women

In considering the types of mental health services that would be most likely to help low-income, depressed women, Guttentag and Salasin point to the Warren finding that working-class women turn to their pastors more often than to physicians for counseling. They suggest that pastors in poor and blue-collar neighborhoods be provided with support services to better equip them to help these women. Because low-income women are not likely to turn to coworkers for help, the investigators suggest that mental health services be offered in an "anonymous yet accessible" manner within the work place, perhaps with union support. Other suggestions include:

- Reeducating men who have stereotyped ideas about women's roles at home and at work, so that they are able to supply emotional support to their wives
- Providing systemwide supports, such as day care for children of working mothers and additional financial aid for single-parent families
- Working to change societal conditions, such as unequal pay and job discrimination, that "create a protracted sense of helplessness in women"

It is the investigators' conviction that "such changes which could positively affect the mental health of women could be accomplished without negative effects on the mental health of men."

Faulty Thinking and Depression
Research by: Aaron T. Beck and Ruth Greenberg

Another theory of the causes and treatment of depression among women is held by Aaron T. Beck and Ruth Greenberg, two

researchers at the University of Pennsylvania Mood Clinic in Philadelphia. Dr. Beck and Ms. Greenberg suggest:

> In order to explain the prevalence of depression in women . . . it is not necessary to determine whether or not women in contemporary America are objectively oppressed. It would suffice to show that women tend to *see themselves* (their emphasis) as needfully dependent, helpless, (and) repressed.

Beck and Greenberg don't deny that, historically, women have been limited in their options. "But," they say, "women both as a group and as individuals will go nowhere unless a critical decision is reached; that is, despite socialization and precedent, to accept responsibility for their lives, goals, families, careers, and psychological symptoms without falling back on the easy excuses of masculine preference, social appearances, difficult times, and circumstances."

These investigators view depression as a cognitive disorder—a problem in the thought process. In clinical tests at the Philadelphia General Hospital, they found that their depressed patients held indiscriminately negative views of themselves, the outside world, and the future—even in the face of objective evidence to the contrary. They overgeneralized, they magnified minor incidents, and they considered only the facts that supported their unhappy viewpoints.

"For example," Beck and Greenberg say, "when a friend fails to meet (her) on time for lunch, the depressed patient may infer that the friend no longer cares for (her) and overgeneralize to the conclusion that (she) has lost all (her) friends. As a consequence, (she) feels sad." What is wrong with these depressed patients, the investigators believe, is not that they feel sadness, but that they have unrealistic reasons for doing so. They place an "automatic" negative thought between an occurrence and their emotional reaction to it. Thus, they are unhappy no matter what happens.

Mind Over Mood

The treatment that Beck and Greenberg propose for depressed persons, men and women, is cognitive therapy—help in changing their thinking. The cognitive therapist trains the patient to recognize her incorrect automatic reactions and to view them objectively. Beck and Greenberg say that, once a patient can recognize a needlessly negative thought, she can put it aside before it makes her depressed.

Besides learning to "monitor" her thoughts, the depressed patient is often helped by talking to herself. The investigators report

that one woman who was afraid that she wouldn't be able to prepare dinner was able to after she told herself, "I've done this many times before, and there is no reason that I should be unable to now."

Sometimes negative thinking takes a pictorial rather than a verbal form. Patients who have unpleasant visual fantasies, Beck and Greenberg say, are encouraged to go back and mend them. Thus, a college instructor who imagined herself with stagefright in front of her class was able to gain confidence through practice in imagining herself conducting her class with ease.

An important advantage that cognitive therapy has over traditional forms of psychotherapy, Beck and Greenberg say, is that the cognitive therapist is a "collaborator" rather than a "god-figure." The therapist makes suggestions which the patient may accept or reject. Another advantage of cognitive therapy, according to the investigators, is that it deals with symptoms and behavior rather than a digging into origins of depression in the unconscious. As a result, a course of cognitive therapy can be completed in a relatively short time and costs less than other forms of therapy.

Comparing Cognitive Therapy With Pharmacotherapy
Research by: Augustus Rush, Aaron T. Beck, Maria Kovacs, and Steven Hollon

How does cognitive therapy stack up against tricyclic drugs in the treatment of depression? "Very well," indicates a recent clinical study made by Augustus Rush of the University of Oklahoma and Aaron Beck, Maria Kovacs, and Steven Hollon of the University of Pennsylvania. On a self-administered measure of depression and clinical ratings, cognitive therapy resulted in significantly greater improvement than pharmacotherapy. Nearly 79 percent of the patients in cognitive therapy showed marked improvement or complete remission of symptoms, compared with less than 23 percent of the pharmacotherapy patients. Although both treatment groups showed substantial decreases in anxiety ratings, the dropout rate was significantly higher with pharmacotherapy than with cognitive therapy.

The subjects for this test were 41 depressed outpatients (26 women and 15 men), 75 percent of whom were suicidal. Roughly half of the patients received 20 cognitive therapy interviews over a 12-week period. The other half received up to 250 mg. of imipramine per day for the 12 weeks.

Both the cognitive therapy and the pharmacotherapy were found to be effective in the treatment of these patients. Patient self-reports and clinical evaluations, the investigators say, showed a "substantial and statistically significant reduction" in symptoms for both of the treatment groups. However, the cognitive therapy resulted in greater improvement than pharmacotherapy.

The reason cognitive therapy compares so favorably with pharmacotherapy, the investigators say, is that, unlike marital therapy, social work counseling, or traditional group therapies, which have had little success in treating depressive symptoms in earlier studies, cognitive therapy has specifically evolved as a treatment for depression. It is directed at depression's "core psychological problems," symptoms such as pessimism, hopelessness, and negative evaluation.

Although the investigators hoped that cognitive therapy would show good results in the treatment of depression in this study, they admit that they were surprised by the finding that it was superior to pharmacotherapy. Cross validation of results on a similar patient sample as well as studies with other populations of depressed patients (e.g., lower socioeconomic class patients) are planned to confirm this unexpected and intriguing result.

Estrogens and Depression
Research by: Edward Klaiber

Looking at depression from a biological viewpoint, Edward Klaiber and his colleagues at the Worchester Foundation for Experimental Biology in Massachusetts have found that the treatment of depressed women with estrogens—female sex hormones—has, in some cases, significantly eased their depression. The more severe the depression, the higher the dose of estrogen needed to bring about improvement. This finding led the investigators to seek factors which impair estrogen function in depressed women, in the hope that they could uncover the fundamental causes of depression itself.

The connection between estrogens and behavior and feelings is not a simple one. In women, estrogens normally inhibit monoamine oxidase (MAO), an enzyme which is believed to regulate the action of a class of chemicals called catecholamines. The catecholamines, in turn, help regulate a number of brain processes. An insufficiency of catecholamine activity, some scientists believe, may be the basis of mental depression. Thus, estrogens, by affecting the level of MAO activity, indirectly affect the brain processes that may cause depression. Dr. Klaiber and his associates, in an

earlier study, found that depressed women had a significantly elevated level of MAO activity in their blood plasma. Administration of estrogen reduced the abnormal level of MAO activity and the depression.

To search out the factors that might interfere with the normal functioning of estrogen in regulating MAO activity, Klaiber and his research team measured the blood plasma concentrations of testosterone, the male hormone, in depressed and nondepressed, pre- and postmenopausal women. Significantly higher levels of testosterone were found in the blood of depressed subjects than those who were not depressed. One result of increased testosterone might be an elevation of MAO activity. The investigators additionally determined that their moderately and severely depressed women patients also had higher levels of estrogen than the control group. This was true for both pre- and postmenopausal women. They found a positive correlation between elevation of estrogen and depression; higher estrogen levels were associated with more severe depressive symptoms—an observation which appears to contradict the early findings in their study.

Estrogen Resistance

The researchers say that the cause of the elevated plasma estrogen levels in the depressed patients may be the increased binding of the estrogen in the blood by specific binding proteins. This would mean that the estrogen is present, but that it is prevented from functioning normally. The investigators call this "estrogen resistance," a phenomenon they had observed previously in severely depressed women. Estrogen resistance appears to be present when much higher doses of estrogen are required to lower the plasma MAO activity in severely depressed women than in less depressed patients. Despite the already high levels of estrogen present in the blood of severely depressed women, still higher levels must be reached before the depressive symptoms are alleviated.

One possible cause of estrogen resistance, the investigators think, is the anti-estrogenic effect of elevated levels of testosterone in the blood of depressed women. They believe additional research measuring the production, metabolism, and binding of estrogen and testosterone in the blood should help to further identify the excessive production or excessive binding responsible for the hormone elevation. A related study is expected to show whether the adrenal cortex is the source of the observed elevation of testosterone in depressed women and of the suspected elevation of estrogen in depressed men. The results of their studies so far are encouraging. Klaiber and his coinvestigators say, "It is possible that

conjugated estrogens may come to occupy a place of importance in the treatment of female depressions in the future."

Other Hormones and Depression Research by: Edward Sachar

Other evidence connecting hormones to depression comes from a study underway by Dr. Edward J. Sachar and his coworkers at the Albert Einstein College of Medicine in New York City. They have found a reduced responsivity of two hormones—human growth (HGH) and luteinizing (LH)—in the blood of depressed postmenopausal women. The reduction in responsivity could not totally be accounted for by the reduced levels of hormones normally found in postmenopausal women. This finding lends support to the idea that a depletion of certain chemicals in the hypothalamus may contribute to some types of depressive illness. These chemicals regulate both mood and hormone function.

The hypothalamus is the part of the human brain that regulates water balance, body temperature, sleep, food intake, and the development of secondary sex characteristics. The hypothalamus and its adjoining structures, the limbic system, are also concerned with the mechanisms that appear to produce emotion. Attached to the hypothalamus is the pituitary gland, and it is here that luteinizing and growth hormones are produced. Luteinizing hormone is involved in ovulation and the secretion of estrogen. Growth hormone, as its name indicates, regulates the growth of the body. In addition, it has a number of diverse and not totally understood effects on the body's metabolism.

Sachar's findings indicate that, even in adult women who are no longer ovulating, the growth and luteinizing hormones may reflect disturbances in the brain chemicals—chemicals which play an important part in regulating moods.

Psychology Plus Pharmacology Research by: Myrna Weissman and Alberto DiMascio

Myrna Weissman of the Connecticut Mental Health Center and Yale University and Dr. Alberto DiMascio of Boston State Hospital and Tufts University presently are involved in a joint project to evaluate the effectiveness of various techniques in treating depression. According to their findings so far, the best treatment is a combination of the psychological and the pharmacological—

psychotherapy plus antidepressant drugs. Research has been conducted concurrently in New Haven and Boston with a sample of 86 depressed patients, 75 percent of whom are women.

Antidepressant drugs, discovered in the late fifties, reduce symptoms of depression, such as feelings of despair and problems with eating and sleeping. Exactly how these drugs work is not known, although there is strong evidence that they increase the level of norepinephrine, a catecholamine, in the nerve cell synapses of the brain. Catecholamines are known to regulate brain processes which possibly affect mood. The psychotherapy used in the Weissman and DiMascio study, on the other hand, did help the patient with the problems of social adjustment and interpersonal relations that accompany depression.

Both psychotherapy and drugs have been accepted forms of depression treatment for several years. Until the Weissman-DiMascio study, however, there was no empirical research on the value of combined psychotherapy and drug therapy in the acute stage of depression.

The psychotherapy undertaken in this study relied on reassurance, clarification of internal emotional states, improvement of interpersonal communication, testing of perceptions, and other techniques conventionally (and incorrectly, say the investigators) grouped under the "supportive" heading. The drug used for pharmacotherapy was amitriptyline.

"Despite dire predictions to the contrary, there have been no negative interactions between psychotherapy and drugs," Weissman reports. "Drugs don't make patients dependent on or less interested in psychotherapy; they don't hurt patient-therapist transference." Neither did Weissman and DiMascio find any negative effect of psychotherapy on drug response. The effects of the two treatments seem largely independent. Together they relieve the symptoms of depression, keep them from coming back, and help the patient function normally in society.

The investigators believe further research is needed on the combination of drug therapy and psychotherapy, specifically, which type of psychotherapy should be used with which drug and which depressed patients benefit from the various combinations of therapy. Although 40 to 50 percent of depressed patients experience a recurrence of depression, Weissman and DiMascio obviously regard depression as a treatable disease. Their primary objective is to learn how to reduce treatment time and prolong recovery.

Gauging the Impact of Depression
Research by: Myrna Weissman and Eugene Paykel

While it's easy to say that what is wrong with a depressed woman is that she's depressed, a number of researchers are seeing a need to assess more specifically each patient's impairment in her roles as wife, mother, worker, and community member. Standardized evaluation of depression and recovery has become an increasingly relevant issue as more and more depressed patients are being treated in their homes and communities rather than in hospitals.

Using a Social Adjustment Scale suggested by Gerald Klerman, Myrna Weissman and Eugene Paykel compared 40 depressed women with their normal neighbors. Their aim was to judge specifically how depression affected the daily lives of these patients.

Six symptoms were studied: impairment of work performance, "anxious rumination" (a painful indecisiveness), emotional dependency, excessive family attachment, inhibited communication, and friction in dealing with people. Of these, the first symptoms to improve as the patient recovered were those that had been the most severe to begin with: impairment of work performance and "anxious rumination." Even when the depressed women were able to perform tasks reasonably well, their distress and dissatisfaction with themselves had made them feel that they were doing poorly.

Women who were employed outside the home showed less impairment in their work than the housewives, the investigators report, suggesting that outside employment may have a "protective" effect on these women. A number of the employed women in this study remained at work during their illness.

Even after their recovery from the symptoms of work impairment, indecision, emotional dependency, and excessive attachment to their families, Weissman and Paykel's patients still had communications problems with their husbands and children. Family relations remained troubled by verbal friction, hostility, and resentment.

Depression and Suicide
Research by: Aaron T. Beck and Myrna Weissman

Whatever its psychosocial or biological origins, untreated depression remains a serious public health problem, not only be-

cause depressed women lead impaired lives, but because they are a high-risk group for suicide attempts. Three studies, one by Aaron Beck and his associates at the Philadelphia General Hospital and two by the Depression Research Unit at Yale, have shown a continuing upward trend in suicide attempts among young women, many of them suffering from depression.

In an analysis of 240 suicide attempts, Beck found that the women attempters were more depressed (on a clinical scale) than the men. The women were also more likely to say that their suicide attempt had been triggered by interpersonal problems. More of them had made attempts before.

The two studies conducted by Myrna Weissman and her associates confirm the finding that suicide attempters are more likely to be young women who are "crying for help" by overdosing with barbiturates. If they don't receive help, they are likely to try again, often with more serious consequences.

Weissman and Fox found that, out of 258 suicide attempters treated at the Yale-New Haven Hospital Emergency Room, women outnumbered men two to one. Of the attempters, 205 had overdosed on pills and had little intent to actually kill themselves. However, the medical effects of these impulsive cries for help were often more serious and more likely to require hospitalization than the results of the more violent attempts, such as wristcutting or shooting (although the latter two were more likely to be successful). Weissman and Fox suggest that, if nothing else can be done about suicide attempts among young females, both doctors and the general public should be better educated about the dangers of commonly prescribed drugs, especially when impulsively taken in combination.

Another study by Lawrence Wexler, Myrna Weissman, and Stanislav Kasl to update U.S. and international trends in suicide observed that the high rate of suicide attempts found in 1970 continued in 1975. The majority of suicide completers are still men. However, the investigators conclude on this ominous note: "The risk of death by suicide is substantially increased in persons with a history of suicide attempts. Over the next decade, this large population of young, female attempters will be entering the age of risk for completers, and we may find an increase in completed suicides among women."

If this last prediction proves true, it will be a needless waste of life considering the recovery rate of depressed women who receive treatment.

5. Living in a Woman's Body

"Anatomy is destiny."

Sigmund Freud, 1856-1936
Father of Psychoanalysis

As Dorothy Wertz points out in chapter 2, Freud wasn't the only 19th and early 20th century researcher to have prejudices about women. Because of their reproductive role and their physical differences from men, women have been protected, patronized, and feared (see Peggy Sanday, chapter 1). But most of all, they have been puzzled over.

Until recent advances in endocrine analysis, hormones have been largely unknown elements in human functioning. Better techniques for measuring hormones in minuscule amounts of blood and urine are an important factor in current research on female biochemistry.

Another aspect of current research is a less prejudiced outlook. Whereas, in the past, physicians tended to dismiss female hormone-based physical and psychological problems as untreatable "female complaints," researchers and practitioners are now concerned with the specific mechanisms of both normal and abnormal hormone function in women.

The research in this chapter illustrates these new concerns. Abplanalp's study of the menstrual cycle, Weisz's work on hormones and behavior, and Shader's and Gershon's experimental treatments for premenstrual tension are approaches to an understanding of the formerly mysterious mechanisms of the female system.

The Menstrual Cycle: Hormones, Mood, and Behavior
Research by: Judith Abplanalp

The trouble with most research on hormones and mood in women, says Boston University psychologist Judith Abplanalp, is

that historically so much emphasis has been put on the menstrual cycle as a source of pain and distress that researchers today continue to accent the negative even when considering normal, healthy women. "As a result," she says, "they have failed to explore the potentially much broader range of changes, positive as well as negative, which might occur not only premenstrually and menstrually, but at other phases of the cycle as well."

To fill this research gap, Dr. Abplanalp is conducting an indepth investigation of the day-to-day relationship between hormones, mood, and behavior in the cycles of normal women. Eventually, she hopes to have the answers to a number of important questions:

- Is psychological functioning related to phase of menstrual cycle?
- Are psychological states related to levels of certain hormones and/or changes in hormonal activity?
- Do beliefs about the menstrual cycle affect daily psychological and hormonal functioning?
- Is cycle length and/or hormonal activity connected with stressful events?
- What are the variations of the menstrual cycle within individuals and within groups of women?

Abplanalp's research is still in the pilot stage. So far, 32 women, most of them Boston University Hospital Center employees, have participated in the study. There was some doubt in the beginning, Abplanalp says, that subjects would be willing to complete mood and activity measures on a daily basis plus allow themselves to be pricked three times a week for a month or more for blood samples. Abplanalp herself, however, has not been surprised by the amount of cooperation she has received. "These women are superb subjects. They're interested because it's about *their* bodies. Plus, we give them feedback about themselves at the end of their participation . . . . Our subjects are our collaborators in this study. I tell them, 'Look, I don't know what we're going to find. We don't have any expectations. The important thing is to be totally honest in reporting your feelings.' "

Day-to-Day Activities

Because Abplanalp's study is a ground-breaking venture, she had to create a new measure, the Activities Log, to gather some of her data. This had to be a particularly sensitive instrument because, in addition to questions on employment, housekeeping, and social activities, it includes sexual behaviors. After interviewing subjects about what they did on a "usual day," Abplanalp and

her assistant, Anne Donnally, tailored an individual log for each subject. This way, no one has to wade through lists of other people's daily activities to find hers. After checking the activities they engaged in each day and for how long, subjects also noted on a scale of 0 to 5 how much they enjoyed each activity. This information, combined with the data from the daily mood questionnaire, gives a day-to-day picture of how active the subject is, in what kinds of activities, and her moods.

Hormone levels are gauged from blood samples. Through a relatively new process known as radioimmunoassay, exact levels of any hormone in the body can be determined from a tiny sample of blood. Using this process, Abplanalp hopes to be able to describe five phases in each menstrual cycle based on the levels of estrogens, progesterone, and other hormones. These phases will then be matched with the activities and mood data to see whether any patterns emerge.

Abplanalp has started to analyze the data of women who have completed at least one cycle in the study. If she has any expectations, they are that "some women will show strong correlations between hormone levels and mood. Others will show none at all. We don't know why. All we know is that some women are more tuned in to their bodies than others."

Because of the small sample size and the exploratory nature of her research, Abplanalp says that she will regard her findings as descriptive rather than explanatory. Further research on the menstrual cycle will be needed to define underlying mechanisms and develop theories. "Our work is only a beginning," she says, "but it's a very exciting beginning."

Medicine Takes a New Look at Women
Research by: Judith Weisz

One of the major developments in the field of medicine as it relates to women is the opening up of a new research specialty—gynecologic endocrinology. Gynecology and obstetrics have traditionally been the only branches of medicine to deal with "women's problems." Endocrinology, the study of hormones, in the past primarily focused on pure laboratory research using animals. Only recently have endocrinological methods been applied to gynecology. Together, gynecology and endocrinology are providing new insights into how the female system operates.

"Now," says endocrinologist and physician Judith Weisz, "advances in endocrinology have begun to provide a 'window' through which we can safely look at human subjects. We have the

analytic tools to precisely measure hormones in blood and urine, as well as in tissue."

Dr. Weisz and her colleagues at the Milton S. Hershey Medical Center in Pennsylvania are studying the relationships among hormones, brain function, and behavior. Weisz thinks that, in the end, researchers will be surprised to find how similar men and women are in their brain and hormone mechanisms. For the time being, however, their research is focused on female biology because the cycles of the female system are more clearly defined than the male's.

Research on gynecologic endocrinology has practical applications, Weisz says, regarding the medical profession's attitudes toward women's problems. "It used to be that there were two strains of thinking about such cyclical female syndromes as premenstrual tension. It was either 'It's all in your head,' or 'It's your hormones.' There was no systematic attempt to get closer to specific hormonal causes."

Weisz believes that, today, the gynecological and obstetrical medical specialties are becoming more biologically and less surgically oriented. She feels that this trend is gradually having a beneficial effect on the treatment women are receiving.

"There is more concern with the interaction of psychology and physical effects," she says. "The cause of a problem—say breast sensitivity—may be psychological, but the consequence—oversecretion of prolactin (a hormone which stimulates milk flow) and possibly a prolactin tumor—is a physical problem."

Weisz is encouraged by the number of medical boards that are currently accrediting gynecologic endocrinology as a legitimate medical speciality. The medical profession appears increasingly willing to consider the "whys" as well as the "whats" of women's biochemistry.

Drug Treatment of Premenstrual Distress
Research by: Richard Shader

Many women have at some time experienced feelings of depression, anxiety, irritability, fatigue, or "bloatedness" before their menstrual periods. Fortunately, most women do not have all these symptoms before every period. Those who do suffer from what is known as the "premenstrual distress syndrome."

According to Harvard psychiatrist Richard Shader, from 20 to 40 percent of the female population is affected by the syndrome to some degree. Approximately 5 to 10 percent of women complain of premenstrual systems so severe that they are virtually incapacitated for a day or more each month.

Shader and his colleagues at the Massachusetts Mental Health Center first became interested in premenstrual tension, as it is most commonly described, as part of their research on factors influencing individual patient's responses to specific drugs. Mainly they hoped to learn why certain medications are ineffective for particular individuals by comparing the characteristics of the people a drug helped with those who were not helped by it. Since sex was already known to be a distinguishing feature in drug response, the investigators decided to look more closely at a distinctly female characteristic—the menstrual cycle.

In the process of documenting specific changes in mood, performance, and behavior during the menstrual cycles, the suspicion was confirmed that premenstrual distress was indeed a syndrome—a group of symptoms. Women who suffered from one of the symptoms were likely to suffer from them all. Additional research confirmed that the symptoms were accompanied by hormonal shifts in the women's blood and urine. The hormonal shifts, the investigators thought, might in turn help account for differences in drug response at different times of the menstrual cycle.

To test the theory, the researchers administered diazepam (Valium) at two different times during the menstrual cycle to women who suffered from premenstrual distress. The diazepam had a positive antianxiety effect during the premenstrual phase, when the women were most likely to experience elevated tension. However, some individuals in the same group of women taking the drug during the follicular phase (after blood flow had stopped but before ovulation) reacted with drowsiness or restlessness rather than relief.

Significance for Research

The importance of this finding, Shader says, is that the duration of many drug studies is typically 6 weeks, which means that the initial medication is going to be at one stage in a woman's menstrual cycle and the followup is going to be at a different stage. "Therefore," says Shader, "results are always going to be colored by menstrual cycle effects....So, certainly one of the most practical things to come out of this early research was the advice which we gave to researchers that, even if the study had to be longer, at least a major checkpoint should be at 4 weeks to control for menstrual cycle effect. Even more ideal would be to evaluate each woman's vulnerability to premenstrual distress and to design trials which can take this and her particular cycle length into account."

Continuing their research into premenstrual distress, Shader and his coinvestigators considered several types of drug treatment. They knew that Sletten and Gershon had had success in treating with lithium small numbers of women with severe premenstrual distress. When they repeated this research themselves, results had also been encouraging—five women who had regularly suffered from severe premenstrual distress said that lithium was a panacea and that they felt dramatic improvement.

"But," says Shader, "this had been an open trial—these women had come to the clinic for help, and they were aware of the medication they were taking." The investigators decided to extend this research to a study of 45 volunteers with symptoms varying from moderate to severe. In this larger study, neither the subjects nor the investigators knew who was taking lithium, a diuretic (a salt- and water-excreting agent which is a traditional treatment for the "bloatedness" of premenstrual distress), or a placebo.

"The preliminary data from this larger study," Shader says, "are distressing. The diuretic didn't work; and the placebo actually worked better than the lithium. Nobody experienced the kind of dramatic relief on lithium reported by the women in the pilot study."

Shader believes that the results of the pilot study were dramatically positive because of the subjects' enthusiasm and suggestibility regarding a potential cure for their premenstrual distress. "Then again," he says, "it just may require a greater degree of disability to experience dramatic relief with lithium. It may also be necessary to have several months of control cycles to understand each woman's variability."

Shader and his associates are continuing their search for an effective treatment for premenstrual distress. They believe that there are implications beyond those of being less able to cope with personal and family problems on certain days. For example, there is evidence from a study by Shader and Myron Belfer that some forms of female "binge drinking" alcoholism may be caused by premenstrual distress. Treatment with diazepam, an antianxiety drug, during their premenstruum helped control this binge drinking. For effective treatment of many disorders, Shader concludes, researchers must consider not only male/female differences and the role of the menstrual cycle in female biology, but also whether a woman subject or patient is among the 20 to 40 percent of the female population affected by the premenstrual distress syndrome.

Lithium as a Treatment for Premenstrual Distress Research by: Samuel Gershon, Baron Shopsin, and Gregory Sathananthan

As research on premenstrual distress continues, not all findings with lithium treatment have been negative. Drs. Samuel Gershon, Baron Shopsin, and Gregory Sathananthan at the New York University School of Medicine recently found that lithium carbonate was superior to either hydrodiuril (a diuretic) or a placebo in treating 18 women with moderate to severe premenstrual symptoms. Their study lasted 9 months, with each patient spending three menstrual cycles on each medication.

These investigators first became interested in the premenstrual syndrome because of its similarities to manic-depressive disease. Both disorders are cyclical; both may be related to changes in the body's water and electrolyte balance; and both involve marked behavioral-mood changes. Because lithium has been successful in relieving the symptoms of manic depressives, the researchers decided to see if it would provide similar relief for women suffering from premenstrual distress.

Dr. Gershon's first experiments, conducted with Dr. Ivan Sletten at the University of Missouri in the mid-sixties, involved eight patients with severe premenstrual symptoms that included screaming, smashing china, and shoplifting. None of these women had experienced relief with sedatives, diuretics, or psychotherapy. All responded to lithium medication when taken three times a day for 10 days prior to their menstrual flow.

In the 10 years since this first experiment, the N.Y.U. team has continued to investigate lithium as a treatment for several disorders—schizophrenia, mania, and depression, as well as premenstrual tension. The questions they are trying to answer are how lithium can be used to learn more about the biochemistry and physiology of mood disorders and through what mechanisms lithium works.

Lithium is an ideal tool for clinical research, the investigators say, because it is a simple chemical which remains unchanged within the body. After lithium is orally administered, its level in the body can be easily gauged in the blood or saliva. Ninety-five percent of it is excreted unchanged in the urine, and, unlike other psychotropic drugs, it is not metabolized in the liver.

What lithium does when it is in the body is another matter. The mechanism (or more likely mechanisms) through which it operates is still largely unknown, although theories abound. There is some evidence that lithium works to regulate the brain chemicals

274-865 O - 78 - 7

discussed by Klaiber and Sachar in chapter 4, but there is no consensus on the matter.

The investigators plan to continue their research on lithium and premenstrual distress by comparing lithium with two other drugs—Dyrenium and Aldatone. Like lithium, both of these drugs generate a loss of water and sodium from the body. Dyrenium is unique in its action, the investigators report, in that it interferes with the exchange of sodium ions for potassium and hydrogen ions. Aldatone, on the other hand, blocks sodium retention by blocking the effects of aldosterone, the principal electrolyte-regulating compound secreted by the adrenal cortex. Lithium also appears to inhibit aldosterone.

By comparing lithium with two compounds that seem to do the same thing but in slightly different ways, the investigators hope to further target in on how lithium works and why it seems to relieve premenstrual distress. "The therapeutic nature of this ion (lithium)," they say, "may represent a converging research link in understanding other affective disorders of an endogenous nature."

6. Women Seeking Help

"She generally gave herself very good advice (although she very seldom followed it)."

Lewis Carroll, 1832-1898
Mathematician and writer

The reason, some say, that many women are turning to nontraditional or "alternative" mental health services today is that they feel they need more than advice but less than a traditional course of psychotherapy. At a time when traditional therapy is being attacked as being rigid, judgmental, and sexist, these alternative services are attempting to deal with the needs of specific groups of women, as expressed by these groups themselves.

Marcia Guttentag and Susan Salasin's 10-State survey of women-to-women mental health services finds programs ranging widely in type, size, funding, approach, goals, and clientele. What these programs have in common is a commitment to the idea that women can help themselves. This self-help sentiment was evident even in programs run or largely staffed by professionals.

Marsha Linehan and Marvin and Anita Goldfried examined another growing form of nontraditional therapy associated with the women's movement—assertion training. Like Sandra Bem in chapter 1, these investigators would like to change the standard of psychological health that says women should be unassertive. Many women want to stick up for their rights, they say, but are unable to. As a result, they are anxious and angry. In this study, assertion training was found to be effective in reducing this anxiety and hostility and in improving relations with others.

An "old" mental health resource for women that has been rediscovered is the neighbor. Lee Morical finds that the isolation of rural housewives tends to magnify their personal problems. What they need are women like themselves to talk with and reassure them that others have faced (and surmounted) the same problems. A similar idea is presented in an urban setting by Rachelle Warren. She says that, for blue-collar women, neighbors are not only the most important but sometimes the only resource for help in coping with personal problems.

Women-to-Women Services
Research by: Marcia Guttentag and Susan Salasin

One of the products of the women's liberation movement has been a proliferation of self-help and other feminist therapy programs throughout the country. The kinds of programs that are emerging, the characteristics of the women who seek help, and the type of problems that lead them to seek help are the subjects of some recent research. As a part of an analysis of services currently available to women, the NIMH-Harvard Mental Health Services and Women Project headed by Marcia Guttentag and Susan Salasin examined 50 alternative and self-help support programs in 10 States.

Services offered included individual and peer counseling, group therapy, rap groups, vocational counseling, consciousness raising, assertiveness training, problemsolving, and family and relationship counseling. Programs varied in their political ideology, from radical feminist—some of which link the plight of women in American society to oppressed peoples throughout the world—to almost total unawareness of the women's movement. "Although most of the services hoped for social reform, some (12 of the 50) supported a platform of internal adjustment to the admittedly undesirable conditions around them," the investigators report.

The assumption behind most of these services is that people can be helped most effectively by someone who has been or is currently in similar circumstances. According to the investigators, "These new women-to-women services based on mutual aid and support have recognized the potential of the self-help mode and (have) begun to put it to use with considerable success." This is despite the fact that few of the programs could be strictly designated as "self-help," because few had staffs consisting totally of recovered clients and nonprofessionals. In spirit, if not yet in actual practice, an attempt is being made to break down the barriers between professional service provider and client.

Of the 50 programs investigated, 42 were located in urban areas. Rural women, this and other studies show, are relatively underserved by alternative mental health programs. Working women get a better break. Many of the programs surveyed were open in the evenings to accommodate women who worked during the day. In addition, fees were generally low compared with formal psychiatric services.

"The two most common reasons for women to seek help," report the investigators, "are 'problems with relationships' and 'gen-

eral dissatisfaction.'" The label "depression," they say, is seldom used by service providers:

> This is perhaps because the women's movement and the mental health services which grew from it are wary of assigning such an ambiguous and often pejorative term to symptoms which frequently elude definition or therapeutic methods. Depression and methods of treatment are inner directed, and many alternative services were attempting to tie women's difficulties to social and political factors that govern behavior . . . . Collective and individual empowerment of women was a notion integral to . . . these services.

Thus, say the investigators, these programs take women who are "frustrated," "lonely," or "unable to cope" and give them opportunities for productive activity and personal responsibility.

Learning to Become Assertive
Research by: Marsha Linehan, Marvin Goldfried, and Anita Goldfried

Assertion training is another form of therapy which has increased in popularity as a result of the women's movement. Numerous popular articles and books on the subject have been published, and a variety of programs are being offered around the country. Only recently, however, has there been any standardized research into what counseling techniques are most effective in training women to be assertive. Now, a study undertaken in Washington, D.C., and Stony Brook, N.Y., indicates that a combination of therapies may be the best approach. It has also been found that, contrary to the much publicized idea that assertion therapy makes women aggressive and abrasive, a large number of husbands, roommates, and friends say that women who participate in assertion training are actually easier to get along with than before.

Three psychologists, Marsha Linehan of Catholic University and Marvin Goldfried and Anita Goldfried of the State University of New York, have recently completed a joint evaluation of the effectiveness of various forms of therapy in promoting assertive behavior in women. Their subjects were 79 women between the ages of 19 and 53. Roughly half were married, and roughly half worked full time outside their homes.

What is healthy assertive behavior? When asked for a working definition, Dr. Linehan called it "effective behavior in situations where one's rights are being jeopardized or one's opinions and

preferences are not being listened to." "Effective behavior," she says, "is any action that protects your rights or allows you your say without losing your self-respect."

Ignorance or Inhibition?

There are two basic theories on why people are not assertive when they should be, the investigators explain. The skills-deficit model says that a nonassertive individual knows when a situation calls for assertive behavior; he or she just does not have the skills to act accordingly. What this individual needs is behavior rehearsal—coaching in various kinds of verbal and nonverbal assertion. The therapist sets up hypothetical situations such as someone breaking into a line. The client must deal with the line breaker politely but firmly. The therapist critiques the clients' performance and offers specific suggestions such as "keep good eye contact" or "try to speak a little louder."

The response-inhibition model, on the other hand, holds that most nonassertive individuals know how to be assertive. Their problem is that they are inhibited from saying the right thing or taking effective action. Possible reasons for this inhibition, the investigators say, are anxiety and the belief that assertive behavior is inappropriate. Also, as Messé and Callahan-Levy and others have pointed out, inhibition may result from excessive concern about the reactions of others. The accepted treatment for inhibition is cognitive restructuring therapy—help in reevaluating the situation to correct unrealistic expectations and reduce anxiety. Together, the client and therapist look at a situation calling for assertion, such as the line-breaking incident, and analyze *why* the client feels uncomfortable making an assertive response. The therapist then helps the client see that this feeling may not fit this situation. Self-defeating thoughts are verbalized and replaced by positive self-statements: "There is no law in the sky that says other people's opinions are more valid than mine." Or, "I can still feel good about myself even though someone else is annoyed at me."

Combining Therapies

To gauge the effectiveness of cognitive restructuring versus behavioral rehearsal versus a combination of the two, Linehan and the Goldfrieds divided their subjects into three groups and gave them 2 months of weekly individual therapy. Women who were receiving therapy not involving assertion training and women on the waiting list for therapy served as controls for the study. After 2 months, standardized measures were used to test the results.

In a role-playing situation, subjects faced obstacles such as a salesperson who refused to accept the return of defective merchandise. The subject-customer was rated on what she said to the salesperson, how clearly and loudly she said it, whether she maintained eye contact, and how many times she responded to the salesperson's repeated, "I'm sorry, but I can't help you without your sales slip." Afterward, the subject reported how much anxiety, guilt, or anger she felt during the encounter.

In another test, each subject was asked to go into a room and complete an assertion questionnaire. When she entered the room, she found a woman sitting with her feet up on the only other chair in the room. When, and if, the subject persuaded this woman to allow her to sit down, the woman proceeded to borrow the subject's pencil and interrupt her by banging a desk drawer. She then tried to convince the subject to proofread for her, to get her a cup of coffee, and to let her read the questionnaire. The subject's responses to these intrusions and requests were recorded on tape.

On both these tests, the investigators say, women who had received some form of assertion training did better than those who had not. Women who had undergone combined restructuring-rehearsal therapy did best of all. The investigators believe the two therapies complemented each other. Restructuring increased the likelihood that a subject would say or do something assertive. Behavioral rehearsal improved the quality (i.e., effectiveness) of what was said or done.

The importance of this finding, the investigators point out, is that, in using these combined therapies, the therapist does not have to waste time analyzing whether a client's problem is a lack of skills or inhibition. The combined therapy works on both these problems.

How Others React to Assertion

At the end of the eight therapy sessions, the investigators asked the subjects' "significant others" (husband, boyfriend, roommate, or other close relative or friend) whether their relationship with the subject had improved, worsened, or remained approximately the same over the previous 2 months. Of the women who had undergone some form of assertion therapy (cognitive restructuring, behavioral rehearsal, or a combination of the two), 44 percent of their significant others said their relationship had improved. Only 11 percent said that the relationship had worsened. Of the women in the control groups (therapy without assertion training or no therapy), 17 percent had significant others who found the relationship improved and 14 percent who said it was worse.

While assertion training may not always improve a relationship, the investigators say, at least their findings show that it does not necessarily damage it. The subjects' self-reports of decreased anger and hostility in assertive situations and increased self-esteem after assertion training give some clues to why some relationships may have improved.

Another finding from this study is that the sex of the therapist is not a major factor in assertion training with women. Women who had male or female therapists did equally well in their improvement on all measures of evaluation. In addition, women who had been treated by a male therapist did not function significantly better in assertive situations with men than those who had been treated by a woman. One possible reason for this finding, the investigators say, is that subjects may have imagined interactions with men even when they had a female therapist. Another possible explanation might be the homework that subjects were required to do—practicing assertion in situations with both men and women.

However, the investigators caution, they do not view this finding as conclusive regarding the effect of sex of therapist in actual clinical settings:

> Inasmuch as the concept of assertiveness reflects values that are congruent with the changing role of women, one can argue that therapist bias would have little effect on the outcome of assertive training. Thus, within the context of the present research, potential bias may have been undercut by virtue of a built-in agreement between client and therapist that the goal was to facilitate assertive behavior.

Housewives Counseling Housewives
Research by: Lee Morical

Wives and mothers keeping house in rural and small-town America are usually considered the epitome of apple pie and mental health. Yet, according to Wisconsin counselor Lee Morical, nonurban housewives are a segment of the American population badly in need of preventive mental health services. Often emotionally as well as geographically isolated, many of these women feel lonely, trapped, bored, and confused about changing lifestyles. Often they are ashamed of these feelings. While many are in need of counseling, Mrs. Morical says, most are reluctant to take what they consider their "silly little problems" to a professional clinic, even if there were one available in their area. "As a result, many of these women receive no help, and patterns of poor mental health are needlessly reinforced and perpetuated,"

she says. What Morical has done about this problem is to start the Peer Counselor Project/Women Helping Women, a training program at University of Wisconsin-Stout which enables rural housewives to help others like themselves with "minor" problems before they result in severe emotional illness.

Morical comes by her awareness of the needs of nonurban housewives through the many years she has lived and worked as a counselor in Menomonie, a city of 11,000 located in rural west central Wisconsin. While working for the campus ministry to the University of Wisconsin-Stout, Morical was struck by the number of student wives and community women who came to talk with her, not so much because she was a professional counselor, but because she was a wife and mother. Morical was also struck by the similarity of her clients' requests: They all hated to "bother" her with their "little problems" when she was so busy; each believed she was alone with her feelings of discomfort; and many seemed to feel guilty about being depressed (tired, anxious, bored) when "I really have everything I always wanted."

Morical's two areas of professional interest are group counseling and counseling with women, so it was natural for her to use group counseling to try to reach more of the rural housewives she had been counseling individually. In September 1971, with support from the campus ministry at Stout, she founded the Center for Women's Alternatives (CWA).

The center provides "self-growth" groups which are offered in nonclinical settings throughout west central Wisconsin. The center's first groups focused on mental health services for housewives with young children, personal goal setting, and self-help in dealing with the life transitions faced by older women. However, as the center became more established in the area, informal studies and interviews by staff uncovered other groups of women in need of help—the elderly, women suffering from postsurgical anxiety, women emerging from psychiatric treatment for depression, recent divorcees, and low-income women.

At the same time that the center was providing information on the needs of rural housewives, its founder was learning from experience how to help them. Morical says, "The kind of help which consistently proved most effective was that offered by a person who was a housewife and mother; who had, in effect, 'been there'; and who was nonjudgmental, caring, and a good listener. Utilization of single women, of men, and of directive individuals in our groups proved to be counterproductive."

"Pragmatic Application of a Principle"*

While observing the activities at CWA, it occurred to Morical that the kind of counselor she found the most effective could be trained in a relatively short period of time, provided she started with the right raw material—a rural or small-town housewife who possessed ego strength, was willing to grow, and had the ability to relate to others in a nonjudgmental way. The person who naturally came to mind, Morical says, was Lorna Gauthier.

Mrs. Gauthier is the wife of a UW-Stout faculty member, mother of six children, and long-time Menomonie resident. Although Morical did not know Gauthier very well at the time, they had worked together on several community and campus projects, and Morical had been struck by her warm personality and competence. Dropping in at her home one evening when Gauthier was up to her elbows in dinner dishes, Morical asked her if she would be willing to become her first peer counselor trainee.

"Something about the whole idea sounded good to me," Gauthier recalls, "and I said 'yes' immediately. At the time I didn't have any concept of how many women's lives would ultimately be touched by the implementation of what sounded like a 'good idea.' "

Morical provided on-the-job training for Gauthier, with emphasis on discussion and critique, and soon the two women were working together in the development of what is now the Peer Counselor Project. Gauthier, formerly an elementary teacher, subsequently returned to school for a degree in child development and family living and today serves as technical training specialist with the Project.

The Peer Counselor Project is today housed at the University of Wisconsin-Stout. The training program for peer counselors lasts 9 weeks. The short training period was designed to make it possible for wives and mothers to participate and to include a coordinated 9-week class in the University's Department of Counseling and Psychological Services. In addition, the training program includes short courses taught by the project staff and supervised field experience. "Because of our belief in the importance of modeling as a key source of learning," Morical says, "the project emphasizes trainee-staff interaction." To facilitate this interaction, the project is quartered in a home-like, one-floor building on the edge of the campus.

"Upon completion of their training," Morical says, "the peer counselors are qualified, working under the supervision of a

*The title of a paper presented by Morical to the American Association of State Colleges and Universities, December 16, 1975.

community agency, to offer help to nonurban housewives of all ages with such concerns as eventlessness, changing lifestyles, feelings of worthlessness, breakdown in communication among family members, loneliness, pre- and postsurgical anxiety, grief, childbirth anxiety, fear of aging and death, and problems of handling time pressures, widowhood, and divorce." These are the problems, says Morical, that aren't usually brought to professional counselors unless the person experiencing them reaches the point of being unable to cope. In addition to their counseling and communication skills, peer counselor graduates must also possess the ability to recognize pathological problems and refer them to appropriate community agencies. Project supervision and evaluation of peer counselors continue for a year after their training.

Because of the unusually short training period, Morical and her staff use rigorous procedures to choose their trainees. Applications are accepted from any rural, small city, or small-town housewife living in Wisconsin, and the staff receives many. The first group of six women, for example, was selected from among 107 applicants. To encourage participation and to assist women who must move to Menomonie for the 9 weeks, stipends and free tuition are available. Most of the trainees live in university housing and become "very close" as a group, says Morical.

The peer counselor trainees have ranged in age from 25 to 65, but most are in their thirties and forties. They are all housewives and mothers from small-town or rural backgrounds. They are largely middle class or slightly below, and several are divorced heads-of-households and low-income single parents. Morical says that, while she expected to find a sense of commitment among the trainees, she still finds "humbling" the efforts and ingenuity of the women in making household arrangements for the 9 weeks they are away from home.

Phyllis Snider, an early trainee, thought "long and hard" before saying goodby to her 3-year-old son for 9 weeks. However, as the mother of six other children, ranging in age from 10 to 21, with a husband who could "pitch in and help," she knew her son would be well cared for.

"When I saw the article about the project in our local paper, it just seemed to leap out at me," Mrs. Snider recalls. "It was what I had waited for all my life, and not to take advantage of this opportunity just did not make sense."

Snider had many moments of missing her young son as well as her older children, one of whom underwent surgery during her training, but she considers the 9 weeks a milestone in her life. With the support of her former supervisor in the County Extension Office of the local mental health clinic and members of the

County Board, Snider has obtained funding to support her offerings of a series of self-help classes for low-income women in her area (Tomah, Wis.). Snider explains her work this way: "When I worked as an aide in a nutrition program for low-income mothers, I could see that a woman just couldn't get interested in balanced meals when her mind was on the fight she'd just had with her husband or if her kids were having trouble at school. My goal in the groups I now offer is to help these women learn more about themselves and how to manage family concerns better. Then they are ready to accept the other offerings of community agencies regarding health, diet, and home management."

The trainees vary in education and past employment. No correlation has been found between age or previous education and the ability to be an effective peer counselor. Some could be peer counselors in any group or individual setting, Morical says. During their supervised practicum and field training, however, others begin to show leanings toward specific environments, such as church groups or homes for the elderly. "It's not a matter of age or ability, but one of personal style," she says.

Irma Donley is an example. A farmwife for 44 years who remembers her first gasoline-powered washing machine as having "smoked a lot," Mrs. Donley decided she wasn't ready to "retire to her rocker." She decided at age 63 to apply for admission to the Peer Counselor Project. She was accepted and completed all her course work with excellent ratings.

One of Donley's classes was a course in group dynamics in which her classmates were largely graduate students in guidance and counseling. "At first it was scary to go back to school after all these years, but I discovered there wasn't really a generation gap with the kids at all," she says. "And I got an 'A' in the class!"

Today Donley is carrying a full caseload as a peer counselor in adult support counseling with the Dunn County Department of Social Services in Menomonie. The words "warm, compassionate, yet assertive," appear in her work evaluation. Working under the direct supervision of the department's homemaker, Donley makes visits to the homes—and sometimes barns—of clients referred to her by the department as needing additional support in handling personal needs and concerns.

Legitimizing Peer Counselors

As satisfied as staff and peer counselors have been with the content of the program, the proof of the pudding has been in the success of the counselors in getting paid employment. Because she has had personal experience in the frustrations of training without employment, Morical feels a "moral obligation" to help

her counselors get paid jobs. "Our aim is to make peer counseling a legitimate counseling subspeciality, such as chemical-dependency counseling. To do that, our peer counselors' skills have to be recognized as saleable—not something to be given away. This can be difficult, when one has the handicap of living in a small community where there is a tradition of volunteerism," Morical says.

Nevertheless, Morical says that the interest shown by agencies throughout Wisconsin in hiring the program's peer counselors has been gratifying. Program graduates have been hired as facilitators of women's self-help groups, home management counselors, outreach workers, and as peer counselors in churches, nursing homes, departments of social services, and agencies serving low-income women and nonurban divorcees. These graduates are earning paraprofessional-level salaries. As more agencies are hearing about the program and the accomplishments of its graduates, they are writing peer counselor positions into their budgets. "Still," says Morical, "lack of (community agency) funding has been and will probably continue to be the major roadblock to immediate employment of every woman trained in the Peer Counselor Project."

In addition to the training and placement of its peer counselors, the project has two other objectives: (1) creation of a training program which can be replicated in other rural parts of the country, and (2) publication of a body of research concerning the mental health needs of rural and small-town housewives.

The training program is being packaged in a combination of audio cassettes and written handouts for each course. Morical is pleased to note that trainee performance has not seemed to suffer as she and the original staff have begun to turn their teaching duties over to others who are using their guidelines and materials. The first in a series of workshops to train other trainers is planned for 1978, after final evaluation of the 3-year experimental project.

As for the research on rural mental health needs, Morical has found that countywide surveys have confirmed her initial subjective impressions. Many rural and small-town housewives suffer from loneliness, boredom, and feelings of worthlessness. They don't require traditional professional help, just a place to drop in and talk. Rural social service agencies are just beginning to recognize this need. Through the outreach efforts of Lee Morical and her staff and through the proven abilities of their peer counselors, these agencies are coming to realize that trained paraprofessionals can fill this preventive mental health need.

Unemployment, Stress, and Helping Networks
Research by: Rachelle Warren

As the studies in chapter 2 seem to indicate, social science researchers are beginning to recognize and confront many previously unstudied aspects of women's employment. It's time now, says University of Michigan sociologist Rachelle Warren, to look at the implications of women's unemployment.

"Contrary to the popular stereotype, it is not the working woman who suffers the most stress in our society," Dr. Warren says. "Our preliminary findings suggest that she experiences far fewer psychological stress symptoms than housewives or women who are unemployed . . . . While women in general report twice as much stress as men, unemployed women report almost four times more stress than unemployed men."

Warren's findings come from a survey of 766 men and women in eight Detroit area communities. Her subjects reviewed a list of psychosomatic symptoms and checked any they had recently suffered. Less than 10 percent of both employed and unemployed men reported such stress symptoms as headache, tension, depression, or trouble falling asleep. In contrast, 18 percent of employed women, 23 percent of housewives, and 33 percent of unemployed women said they suffered from these symptoms. Whatever the role conflicts suffered by working women, they apparently do not equal in stress the emotional hardships of being without a paying job when a woman wants and needs one.

Unemployed, Blue-Collar Women: "Who Can I Turn To?"

Warren also found that the people who received the least help in dealing with unemployment stress were blue-collar women. When blue-collar men lose their jobs, she says, they turn to their wives, their unions, and their buddies down at the corner bar for financial and emotional support. White-collar men and women receive help from professional counseling agencies. Blue-collar women, for the large part, do not belong to unions and, in Detroit at least, work at assembly-line positions that do not afford an opportunity to make friends on the job. Less than half of the women Warren interviewed said that they could count on their husbands for help and emotional support in times of stress. Although blue-collar women turn to their clergyman more often than do men or white-collar women, only 5 percent of them reported making use of this helping resource. As for help from professional agencies, most of the

blue-collar women have neither the mobility to find such help nor the money to pay for it.

The despair these women feel was summarized by a victim of a cutback at an auto plant:

> I had to take that job. I never learned to be secretary or anything like that in high school....The union is no good for someone like me . . . and my neighbors call the police if my dog places a paw on their lousy property . . . . I have no one here. Who can I turn to?

Support From Neighbors

"For the blue-collar woman, the neighborhood is the most important—and sometimes the only—resource for coping with problems and stress," says Warren. Her research, which was conducted as part of a larger study on helping networks in the urban community, includes data on which kinds of neighborhoods are the best resources for these women. "The most supportive neighborhoods were those in which the residents got together frequently, had many things in common, and were active in the outlying community," Warren says. She found that women in the "high-organization" neighborhoods are five times more likely to rely on their neighbors for help than they are in the more transitory, socially indifferent "low-organized" neighborhoods. In these neighborhoods, blue-collar women undergoing unemployment or other long-term stress have virtually no one to turn to. In light of these findings, Warren raises several important mental health policy issues:

1. Are white-collar employed women monopolizing the professional help-giving resources of communities?
2. Are women in blue-collar jobs too isolated from professional help givers who could be used in lieu of neighbors or coworkers and, perhaps, friends and husbands?
3. If the neighborhood is the critical resource of the employed blue-collar woman, what is the mental health implication of increasing or large-scale unemployment for this group during times of recession or depression? Should they be the target of professional mental health services in our working-class and industrial communities?
4. What can be done to make local neighborhoods a more valuable resource for informal helping in response to various life crises or recurrent problems which may eventually become serious or chronic mental health pathologies?

Like Lillian Rubin, Warren speaks of the hardships of working-class life, and, like Lee Morical, she is concerned with the prevention of mental health problems, in this instance, in an urban population. Warren clearly believes that healthy neighborhoods produce and reinforce individual mental health. It is up to the policymakers, the mental health professionals, and community leaders to encourage this neighborhood health resource.

Conclusion—What Now?

As varied as are the grants on women described in the preceding chapters, during the next several years NIMH plans to increase the scope of the research even further. With increased breadth, there is always a danger of decreased depth. The Institute is well aware of this. Certain "old" problems, such as female depression and the destructive effects of sexual discrimination, are far from solved. Yet, "new" problems, such as the increasing numbers of single women struggling to support themselves and their children on low-level incomes, are constantly coming to light. In encouraging and supporting new research, the Institute has to keep a balanced concern for women of all ages, at all socioeconomic levels, and in previously underresearched racial and ethnic minorities. The myth of the melting pot has been replaced by the reality of the salad bowl, and research cannot ignore class, race, and age differences in American society.

In the area of sex-role research, a future target is a synthesis of previous research on men's and women's sex-role attitudes, including how men have reacted to women's changing role expectations. Without some degree of acceptance by men, new roles for women can only result in societal and familial strain.

Also under the heading of sex-role research, investigation is planned on women whose sex-role attitudes and behavior have not changed. Already evident among some American housewives is a "backlash" movement against social trends they feel are being forced upon them—such as equal rights, unisexism, and careers for women—which they believe will further destroy an already weakened family structure. These women are too large a group to be ignored.

Working women will continue to be a subject of research, too, especially in regard to possible role conflicts between family and employment, such as those investigated by Hauenstein, Walshok, and Lamphere. As more women enter the work force by choice and by necessity, it will be useful to see how increased economic power affects their status in family and community life.

In the fields of biology and biochemistry, the puzzles of female endocrine physiology remain. The relation of depression and premenstrual distress to hormones and the workings of the menstrual cycle before and after menopause are still largely unclear.

Other studies will investigate male and female functioning as they relate to sex-defined family and work roles, sex-typed behavior, and such feelings as self-esteem and anxiety which appear sometimes sex related.

Finally, research on mental health therapy for women will continue to receive emphasis. As the last chapter indicates, there is presently much interest but little scientific investigation about possible sex bias in how a client is diagnosed or treated. The need for studies of psychotherapy values in both process and outcome continues to be great.

Other areas of concern in the mental health system include possible sex differences in the prescription of drugs—are women mental patients routinely given more drugs than men? Sex differences in other aspects of treatment—are women more likely to be institutionalized? Illness and criteria for recovery—are men and women judged sick or well by different standards?

Improving the range of mental health services offered to women will be another major aim over the next few years. While more women than men are treated in Community Mental Health Centers, there seems to be an increasing need for the kinds of alternative services discussed by Marcia Guttentag, Susan Salasin, and Lee Morical—services directed at women with particular problems, such as loneliness, alcoholism, single parenthood, divorce, widowhood, and physical abuse by husbands. Research is needed to assess the value of these alternative services as compared with more traditional therapies. And as Lillian Rubin and Rachelle Warren have pointed out, more attention will have to be paid to the values and sensibilities of the working- and low-income classes in research and in the application of research to the design and staffing of mental health programs.

In all these areas of research, efforts will be made to encourage grant applications by women. Of the 30 research projects described here, 19 had women as principal investigators. In the past 6 years, the number of research applications from women has increased from 9 to 23 percent. The percentage receiving funding is roughly the same as those from men. Outreach efforts are continuing to inform women in the research community about grant possibilities and to encourage them to apply.

Finally, for research information gained on the lives of women to be of use, efforts are continually being made to make such information available to the public. This volume is part of these efforts.

Investigators, Grant Titles, Grant Numbers, and Relevant Publications

(Note: ROI indicates a regular grant; RO3, a small grant; FOI, a fellowship; and T, a training grant. Grantee addresses are not necessarily those of the institutions at which the projects were conducted.)

1. Sex Roles and Sex Stereotypes

JO FREEMAN—Origins of the Women's Liberation Movement. State University of New York, Purchase, N.Y. 10577 **FO1 MH54783**

Freeman, Jo. The origins of the women's liberation movement. *American Journal of Sociology,* 78(4):792-811, 1973.

Freeman, Jo. *The Politics of Women's Liberation.* New York: David McKay Company, Inc., 1976.

KAREN O. MASON—Secondary Analysis of Sex Roles Data. The Population Studies Center of the University of Michigan, Ann Arbor, Mich. 48104 **RO1 MH25271**

Mason, Karen O. *Sex-Role Attitude Items and Scales From U.S. Sample Surveys.* Rockville, Md.: National Institute of Mental Health, 1975. 65pp.

Mason, Karen O.; Czajka, John L.; and Arber, Sara. Change in U.S. women's sex-role attitudes, 1964-1974. *American Sociological Review,* 41(4):573-596, 1976.

U.S. Department of Health, Education, and Welfare. How women see their roles: A change in attitudes. *New Dimensions in Mental Health.* DHEW Publication No. (ADM) 76-343, 1976. 5 pp.

DAVID J. GREENSTONE—Politics and Families: Changing Roles of Urban Women. National Opinion Research Center, University of Chicago, Chicago, Ill. 60637 **RO1 MH23786**

McCourt, Kathleen. "Politics and the Working-Class Woman: The Case on Chicago's Southwest Side." Unpublished doctoral thesis.

SANDRA L. BEM—Sex Roles: The Behavioral Consequences of Androgyny. Stanford University, Stanford, Calif. 94305 **RO1 MH21735**

Bem, Sandra L. The measurement of psychological androgyny. *Journal of Consulting and Clinical Psychology,* 42:155-162, 1974.

Bem, Sandra L. Sex-role adaptability: One consequence of psychological androgyny. *Journal of Personality and Social Psychology,* 31:634-643, 1975.

Bem, Sandra L. Androgyny vs. the tight little lives of fluffy women and chesty men. *Psychology Today,* 9:58-62, 1975.

Bem, Sandra L., and Lenney, Ellen. Sex-typing and the avoidance of cross-sex behavior. *Journal of Personality and Social Psychology*, 33(1):48-54, 1976.

PEGGY R. SANDAY—A Cross-Cultural Analysis of Female Status. University of Pennsylvania, Philadelphia, Pa. 19174 **RO1 MH25836**

Sanday, Peggy R. Toward a theory of the status of women. *American Anthropologist*, 75:1182-1200, 1973.

Sanday, Peggy R. Female status in the public domain. In: Rosaldo, M.Z., and Lamphere, Louise, eds. *Woman, Culture, and Society*. Stanford, Calif.: Stanford University Press, 1974.

Sanday, Peggy R. *Male and Female: The Origins and Consequences of Sexual Inequality*. (Book in preparation.)

LAWRENCE A. MESSÉ—Sex Differences in Reward Distribution Behavior. Michigan State University, East Lansing, Mich. 48824 **RO3 MH24550**

Messé, Lawrence A., and Callahan, Charlene M. Sex differences in the allocation of pay. *Sociometry*. (in press).

Messé, Lawrence A., and Callahan, Charlene M. Sex and message effects in reward allocation behavior. *Sociometry*. (in press).

2. Women's Work

MARY L. WALSHOK—Nontraditional Blue Collar Work Among Urban Women. University of California Extension, San Diego, Calif. 92903 **RO1 MH27685**

Walshok, Mary L. "The Perceived Benefits of Paid Employment to Women in Working Class Jobs." Revised version of a paper presented at the annual meetings of the American Association for the Advancement of Science, 1976. Available from author.

Walshok, Mary L. "The Integration of Employment and Family Roles Among Women in Blue Collar and Working Class Jobs." Paper presented as part of NIMH seminar series on "The Urban Struggle: Women and Work," February 3, 1977.

LOUISE LAMPHERE—Women, Work and Ethnicity in an Urban Setting. Center for Policy Research, 475 Riverside Drive, New York, N.Y. 10027 **RO1 MH27363**

Lamphere, Louise. "Women, Work and Ethnicity." Paper presented as part of NIMH seminar series on "The Urban Struggle: Women and Work," April 7, 1977.

RICHARD A. BERK—Urban Household Work and Mental Health. University of California, Santa Barbara, Calif. 9310[illegible] **RO1 MH27340**

Berheide, Catherine W.; Berk, Sarah F.; and Berk, Richard A. "Household Work in the Suburbs: The Job and its Participants." Unpublished paper available from authors.

Berk, Sarah F.; Berk, Richard A.; and Berheide, Catherine W. "The Non-Division of Household Labor." Unpublished paper available from authors.

LOUISE S. HAUENSTEIN—Attitudes of Married Women Toward Work and Families. Program for Urban Health Research, University of Michigan, Ann Arbor, Mich. 48103 **RO1 MH24887**

Hauenstein, Louise S. "Attitudes of Married Women Toward Work and Family." Three unpublished reports available from author.

DOROTHY C. WERTZ—Cultural Values in Health Research on Women Workers. Research for Social Change, Inc., Cambridge, Mass. 02138 **RO3 MH27206**

Wertz, Dorothy C. "Social Science Attitudes Toward Women Workers." Paper presented as part of NIMH seminar series on "The Urban Struggle: Women and Work," October 14, 1976.

3. Marriage, Divorce, and After

LILLIAN B. RUBIN—Women's Liberation: Is the Definition Class Bound? Institute for Scientific Analysis, 1945-B Bonita St., Berkeley, Calif. 94704 **RO1 MH23468**

Rubin, Lillian B. The marriage bed. *Psychology Today,* August 1976.

Rubin, Lillian B. *Worlds of Pain.* New York: Basic Books, 1976.

LARRY L. BUMPASS—Marriage, Female Roles and Marital Disruption. Center for Demography and Ecology, University of Wisconsin, Madison, Wis. 53706 **RO1 MH24907**

Bumpass, Larry L., and Sweet, James A. Differentials in marital instability of the black population: 1970. *Phylon,* 35(3): 323-331, 1974.

Bumpass, Larry L., and Sweet, James A. "Background and Early Marital Factors in Marital Disruption." Paper presented at the annual meeting of the American Sociological Association, San Francisco, Calif., August 1975. Available from authors.

Retert, Sandra L., and Bumpass, Larry L. "Employment and Approval of Employment Among Mothers of Young Children." Center for Demography and Ecology Working Paper 74-4 (1974).

Bumpass, Larry L., Rindfuss, Ronald R. "Age and the Sociology of Fertility: How Old is Too Old?" CDE working paper 75-24 (1975).

Davis, Nancy J., and Bumpass, Larry L. The continuation of education after marriage among women in the U.S.: 1970. *Demography,* 13(2):161-74, 1976.

Bumpass, Larry L., and Mburugu, E.K. "Age at Marriage and Completed Family Size." CDE working paper 76-22 (1976).

Bumpass, Larry L.; Rindfuss, Ronald R.; and Janosik, Richard. "Age and Marital Status at First Birth and the Pace of Subsequent Fertility." CDE working paper 77-1 (1977).

Rindfuss, Ronald R., and Bumpass, Larry L. "Fertility During Marital Disruption." Forthcoming in *Journal of Marriage and the Family* (1977).

LENORE J. WEITZMAN—The Social Effects of Divorce and Divorce Law Reform. University of California, Davis, Calif. 95615 **RO1 MH24216**

Weitzman, Lenore J., and Dixon, Ruth B. "Alimony: A Quest for Justice in Changing Times." Paper presented at the annual meeting of the American Sociological Association, New York City, N.Y., August 1976. Available from authors.

DELUVINA HERNANDEZ—Role Patterning of Chicana Household Heads on Welfare. National Chicana Foundation, Inc., 2114 West Commerce St., San Antonio, Tex. 78204 **RO1 MH27326**

CHARLES B. WILKINSON—Strengths-Weaknesses in Black Female Headed Families. The Greater Kansas City Mental Health Foundation, Kansas City, Mo. 64108 **RO1 MH24858**

4. Women and Depression

MYRNA M. WEISSMAN and **ALBERTO DIMASCIO**—Evaluation of Psychotherapy in Treating Depression. Yale University School of Medicine-Connecticut Mental Health Center, New Haven, Conn. 06519 and Tufts University-Boston State Hospital. **RO1 MH26466**

Weissman, Myrna M., and Klerman, Gerald, L. Sex differences and the epidemiology of depression. *Archives of General Psychiatry,* 34:98-111, 1977.

Weissman, Myrna M. Depressed Women: Traditional and non-traditional therapies. In: Claghorn, J.L., ed. *Successful Therapy.* New York: Brunner/Mazel, 1976.

Weissman, Myrna M., and Paykel, Eugene S. *The Depressed Woman: A Study of Social Relationships.* Chicago: University of Chicago Press, 1974.

Fox, K., and Weissman, M. Suicide attempts and drugs: Contradiction between method and intent. *Social Psychiatry,* 10:31-38, 1975.

MARCIA GUTTENTAG—Mental Health Services and Women: A Collaborative Study. Harvard University, Cambridge, Mass. 02138 and the National Institute of Mental Health. **RO1 MH26523**

Guttentag, Marcia, and Salasin, Susan. Women, men and mental health. In: Cater, L., and Scott, A., eds. *Changing Roles of Men and Women.* Aspen, Colo.: Aspen Press, 1976.

Guttentag, M., and Salasin, S. et al. *The Mental Health of Women: Fact and Fiction.* New York: Academic Press (in preparation).

AARON T. BECK—Assessment & Therapy of Depressed Suicidal Patients. University of Pennsylvania, Philadelphia, Pa. 19104 **RO1 MH19989**

Beck, Aaron T., and Greenberg, Ruth L. Cognitive therapy with depressed women. In: Franks, V., and Burtle, V., eds. *Women in Therapy.* New York: Brunner/Mazel, Inc., 1974.

Beck, Aaron T.; Lester, David; and Kovacs, Maria. Attempted suicide by males and females. *Psychological Reports,* 33:965-966, 1973.

EDWARD L. KLAIBER—Steroids in Health and Disease. **RO1 MH18757** Relationship of Steroids to Monoamine Oxidase and Behavior. **RO1 MH26424** Worcester Foundation for Experimental Biology, Inc., Shrewsbury, Mass. 01545

Klaiber, E.L.; Kobayashi, Y.; Broverman, D.M.; and Hall, F. Plasma monoamine oxidase activity in regularly menstruating women and in amenorrheic women receiving cyclic treatment with estrogens and a progestin. *Journal of Clinical Endocrinology & Metabolism,* 33:630-638, 1977.

Klaiber, E.L.; Kobayashi, Y.; Broverman, D.M.; Vogel, W.; and Moriarty, D. Effects of estrogen therapy on plasma MAO activity and EEG driving responses of depressed women. *American Journal of Psychiatry*, 128(12): 1492-1498, 1972.

Klaiber, E.L.; Broverman, D.M.; Vogel, W.; and Kobayashi, Y. The use of steroid hormones in depression. In: Proceedings of the First World Congress of Biological Psychiatry, Buenos Aires, Argentina, 1976.

Rush, Augustus J.; Beck, Aaron T.; Kovacs, Maria; and Hollon, Steven. "Comparative Efficacy of Cognitive Therapy and Pharmacotherapy in the Treatment of Depressed Outpatients." Unpublished paper available from authors.

EDWARD J. SACHAR—Steroid Hormones in Depressive Illness. Albert Einstein College of Medicine, New York, N.Y. 10461 **R03 MH25133**

Altman, N.; Sachar, E.J.; Gruen, P.H.; Halpern, F.S.; and Eto, S. Reduced plasma LH concentration in postmenopausal depressed women. *Psychosomatic Medicine*, 37(3):274-276, 1975.

Gruen, Peter H.; Sachar, Edward J.; Altman, Norman; and Sassin, Jon. Growth hormone responses to hypoglycemia in postmenopausal depressed women. *Archives of General Psychiatry* 32(1): 31-33, 1975.

5. Living in a Woman's Body

ROBERT M. ROSE and **JUDITH ABPLANALP**—Psychoendocrinology of the Menstrual Cycle. Boston University School of Medicine, Boston, Mass. 02218 **R01 MH28326**

JUDITH WEISZ—Androgens, Brain, and Behavior. Milton S. Hershey Medical Center of Pennsylvania State University, Hershey, Pa. 17033 **R01 MH24279**

RICHARD I. SHADER—Drug Studies with Women, the Elderly and Groups. Harvard University, Cambridge, Mass. 02115 **R01 MH12279**

SAMUEL GERSHON—Psychopharmacology of the Lithium Ion. N.Y. University School of Medicine, New York, N.Y. 10016 **RO1 MH17436**

Sletten, Ivan W., and Gershon, Samuel. The premenstrual syndrome: A discussion of its pathophysiology and treatment with the lithium ion. *Comprehensive Psychiatry*, 7(3):197-206, 1966.

Gershon, Samuel, and Shopsin, Baron, eds. *Lithium: It's Role in Psychiatric Research and Treatment*. New York: Plenum Press, 1973.

6. Women Seeking Help

MARCIA GUTTENTAG—Mental Health Services and Women: A Collaborative Study. Harvard University, Cambridge, Mass. 02138, and National Institute of Mental Health. **RO1 MH26523**

Guttentag, Marcia, and Salasin, Susan, et al. Women to women services. *Social Policy*, September/October 1976.

MARSHA M. LINEHAN—Assertion Training with Women. Catholic University of America, Washington, D.C. 20064 **RO3 MH26313**

Linehan, Marsha M; Goldfried, Marvin R.; and Goldfried, Anita P. "Assertion Therapy: Skill Training or Cognitive Restructuring." Unpublished paper available from authors.

LEE MORICAL—Peer Counseling Training for Non-Urban Housewives. University of Wisconsin-Stout, Menomonie, Wis. 54751 **TR1 MH14070**

Morical, Lee. "The Peer Counselor Project: Pragmatic Application of a Principle." Paper presented to the American Association of State Colleges and Universities, Oakbrook, Ill. 1975. Available from author.

DONALD I. WARREN (RACHELLE B. WARREN)—Helping Networks in the Urban Community. University of Michigan, Ann Arbor, Mich. 48104 **RO1 MH24982**

Warren, Rachelle. "The Work Role and Problem Coping: Sex Differentials in the Use of Helping Systems in Urban Communities." Paper presented at the annual meetings of the American Sociological Association, San Francisco, Calif., 1975. Available from author.

Warren, Donald I., and Warren, Rachelle B. Six Kinds of Neighborhoods. *Psychology Today*, 78-80, June 1975.

Warren, Rachelle. "Stress, Primary Support Systems and the Blue Collar Woman." Unpublished paper available from author.

Warren, Rachelle B., and Warren, Donald I. *The Neighborhood Organizer's Handbook*. Notre Dame, Ind.: University of Notre Dame Press, 1977. 256 pp.

U.S. GOVERNMENT PRINTING OFFICE : 1978 O—274-865